

# STATE OF CONNECTICUT SNAP ED PLAN

## AMENDMENT

FFY2020



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# State Wide Budget FFY2020

## Federally Funded Expenditure Summary

Expenses		FFY 2019 Carry Fwd Budget	FFY 2020 CNR Allocation Budget	State Cash
1	Direct Costs	47,178.17	2,561,586.52	0
2	Contracts/Grants/Agreements	0.00	334,749.00	0
3	Non-Capital Equipment/Supplies	0.00	67,328.42	0
4	Materials	1,117.00	58,667.23	0
5	Travel	0.00	93,827.50	0
6	Administrative	0.00	1,000.00	0
7	Building/Space	0.00	49,885.00	0
8	Maintenance	0.00	0.00	0
9	Equipment & Other Capital Exp.	0.00	0.00	0
10	Indirect Costs	12,556.74	705,640.36	0
11	Travel - DSS	0.00	4,797.22	0
12	Total	60,851.91	*3,877,481.00	0

\*rounded down

## Executive Summary

The Connecticut Department of Social Services is pleased to submit its three-year Supplemental Nutrition Assistance Program (SNAP)-Nutrition Education for federal fiscal year 2019, 2020 and 2021. This version of the plan focuses on improvements for FFY2020 and FFY2021 and builds upon the original plan submitted for FFY2019.

The plan incorporates the recommendation of the current Dietary Guidelines for Americans and U.S. Department of Agriculture food guidance. The primary emphasis remains on assisting the SNAP-Ed target population to establish healthy eating habits within a limited budget and promote physically active life styles to prevent or postpone the onset of disease, including obesity.

Each of the SNAP Ed contractors work diligently to enhance collaboration with state, municipal and community leaders to improve both policy and practice around food access, food quality and nutrition education targeting low-income SNAP residents in Connecticut.

DSS will continue to contract directly with The Department of Public Health (DPH) *Pre-School, Families, and Community Project*; The Hispanic Health Council *School & Family Based SNAP Ed Services*; The University of Connecticut Health Husky Nutrition Programs; The University of Connecticut College of Agriculture and Natural Resources (CANR) *Food Security*; The University of Connecticut Neag School of Education *Husky Sport*. (The Husky Sport program is under that college's authority and not CANR. This change also gives the department greater control over the program.); and The University of Connecticut *School and Family Project*.

All six implementing agencies have shown program progress toward reaching the SNAP Ed plan's overall goals for FFY19-21. In an effort to increase healthy food choices and physical activity for those who are eligible to receive SNAP benefits, the Department of Public Health has introduced a new initiative, the Nutrition and Physical Activity Self-Assessment for Child Care (Go NAP SACC). In FY19, DPH implemented this initiative at three early childhood education (ECE) sites. The intention is to implement this program into 45 ECE. Similarly, Husky Sport has implemented direct education efforts to increase the knowledge of, choices around, and access to healthy foods and physical activity within the Wish School. Husky Sport intends to continue these efforts in FFY20-21, building an enhanced culture of health and activity through increased physical activity and nutrition.

Both the Hispanic Health Council and UConn Food Security have also worked to increase healthy food choices and physical activity for SNAP-eligible individuals in FFY19 and continue to do so in FFY20-21. The Hispanic Health Council began incorporating vegetable –tasting activities into nutrition education services in Hartford and Bridgeport in FFY19. For FFY20-21, these activities will be offered in all seven cities served by this implementing agency. Similarly, UConn Food Security is working to increase awareness of public spaces available for physical activity, including the

development of maps with resources to trails, parks, walking paths, etc. These maps will be promoted through the Meriden Farmers' Market in FFY20-21.

Both UConn School and Family and UConn Health have worked diligently to support comprehensive, multi-level interventions, community and public health policy, and systems and environmental changes to facilitate healthy food and physical activity choices for SNAP-Ed eligible individuals. UConn School and Family has worked with FoodCorps to establish best practices, through a resources guide and infographic, to improve parent engagement in the FoodCorp program. This information will continue to be distributed to more CT School Districts in FFY20-21. UConn Health has implemented Husky Reads, which was approved in the SNAP Connections Toolkit. For FY20, data collection will continue in efforts to increase the evidence base for this preschool literacy and nutrition education curriculum.

Connecticut is proud to provide updates on new/existing partnerships developed in effort to reach state-level goals and objectives:

- Department of Public Health is partnering with CT WISEWOMAN program, a cardiovascular risk reduction program for under/uninsured women, working to develop a cross-referral system to offer nutrition education workshops/telephonic health coaching for participants who want to make healthy changes.
- UConn Health continues to work with UConn Husky Sport to coordinate nutrition messaging and direct programming in the 06121 zip code area of the Hartford Promise Zone. IN FY20, a nutrition educator will be designated to actively participate in on-site parent and staff engagement at the Wish Museum School to coordinate nutrition education programming and messaging to support the School Culture of Health Project. The initial implementation of the coordinated plan and evaluation framework is schedule for FY2021.
- Hispanic Health Council joined a new collaborative initiative with Hartford Hospital in FFY19, the Hartford Food System, which operates the Hartford Mobile Market and Wholesome Wave initiatives. SNAP recipients who purchase produce at these sites will receive incentives. In FFY2020 and through FFY21, the Hispanic Health Council will be delivering nutrition education at theses points of purchase.
- UConn School and Family are expanding their school and family engagement to East Hartford, afterschool programming at a low-income apartment complex, Squire Village, in Manchester CT, and dental clinics in Hartford.

Evaluation Plan	
<b>Department of Public Health</b>	<ul style="list-style-type: none"> <li>• Process and outcome evaluations of main nutrition education activities</li> <li>• Demographic cards, pre-test, post-test, six-week follow-up surveys</li> <li>• Descriptive statistics on number of sites visited, participants in trainings, staff who received trainings, and families/children served by sites trained.</li> </ul>

<b>Uconn Food Security</b>	<ul style="list-style-type: none"> <li>• Food Security will utilize the Fruit and Vegetable Inventory and the EFNEP Food and Physical Activity Questionnaire for a subset of participants.</li> <li>• These surveys all address dietary changes, and the EFNEP survey also assesses food resource management, physical activity and food safety.</li> <li>• Each lesson in the Seniors Eating Well Curriculum includes a short evaluation, including questions regarding knowledge and intent to change/behavioral questions.</li> <li>• We will use these evaluations when using this curriculum with seniors.</li> <li>• We will work with the PATHS Team to assess the importance of public spaces for physical activity, and implement a short survey to determine how SNAP-Ed educational efforts affect objectives related to physical activity for the SNAP-eligible populations in Connecticut.</li> </ul>
<b>Hispanic Health Council</b>	<ul style="list-style-type: none"> <li>• For all HHC SNAP-Ed direct services, process and outcome data will continue to be collected to assess changes in knowledge, and self-efficacy, through the use of pre/post-test surveys.</li> <li>• In FY 2020, dietary intake data using a short food questionnaire among participants in serial nutrition workshops will also be collected.</li> <li>• For the social media campaign, pre/post data campaign will be collected to assess changes in knowledge, attitudes, and fiber intake among participants as result of their exposure to these campaign. The program uses the main core indicator from the SNAP-Evaluation Framework.</li> </ul>
<b>Uconn Health</b>	<ul style="list-style-type: none"> <li>• findings from a prior evaluation suggest the ability of preschoolers to identify blueberries, strawberries, carrots, and broccoli increased significantly after participation in one Husky Reads lesson; although the findings were promising, the evaluation design lacked a control group and relied on a classroom-wide assessment</li> <li>• in an effort to improve the evidence base for Husky Reads from practice-tested to Research-based, continuation of the evaluation will occur in the upcoming two years as a control trial. The research protocol has UConn Health IRB approval and is a registered clinical trial (NCT 03338257)</li> </ul>
<b>Husky Sport</b>	<ul style="list-style-type: none"> <li>• The Uconn Neag School of Education, Husky Sport Program focuses on school-age children, primarily at Fred D. Wish Museum School (PreK-5th) and neighborhood-based out of school time programs.</li> <li>• All direct education for SNAP-Ed programs includes data collection through a mixture of pre-test post-test surveys and focus groups with youth participants scheduled multiple times throughout the year.</li> <li>• In FY20, there will be an added assessment of students 'Physical Literacy' at the beginning and end of the year at Wish School. Husky Sport uses the main core indicators (MT 5,6) from the SNAP-Evaluation Framework.</li> </ul>
<b>Uconn School and Family</b>	<ul style="list-style-type: none"> <li>• Qualtrics-based data collection on diet and physical activity behaviors</li> <li>• Increase utilization of electronic collection of diet and physical activity behaviors – data stored on secure UConn server</li> </ul>

## Needs Assessment

### Template 1: Identifying and Understanding the SNAP-Ed Target Audience

#### Needs Assessment Methodology

The process for conducting this needs assessment required compiling data and additional information available from Connecticut state agencies, the CT SNAP-Ed team, community partners, websites and publications. A brief summary of the approach taken for each of the four sections in this needs assessment precedes the tables.

The first section of the needs assessment provides a demographic profile of the SNAP-Ed target audience using five data sources. The data sources include:

- Connecticut Department of Social Services' (DSS) eligibility management system reports for January 2018,
- USDA Food and Nutrition Service report, "Characteristics of Supplemental Nutrition Assistance Program Household Program Households, Fiscal Year 2016"
- Department of Public Health (DPH) town population estimates for calendar year 2016
- Department of Economic and Community Development estimates of town-level median household income estimates based on the 2011-2015 American Community Survey,
- State Department of Education school district 2016/2017 eligibility rates for free and reduced lunch

The second section of the needs assessment provides an overview of obesity and overweight, diet and diet-related chronic disease in Connecticut and more specifically, for the SNAP target population. Information for this section comes from Department of Public Health reports issued to summarize results from the statewide Behavioral Risk Factor Surveillance Survey (2011-2015) and the 2015 Youth Risk Behavior Surveillance Survey. Further information about child weight status comes from a 2016 BMI surveillance report of preschool children in Hartford, a 2016-17 BMI surveillance report of children in New Britain schools, a 2017 DPH surveillance study of weight status among kindergarten and 3<sup>rd</sup> grade children, and results from a convenience sample of children at an urban pediatric emergency department.

The third section of the needs assessment highlights nutrition activities within the state beyond those that are implemented as part of SNAP-Ed. Information about nutrition activities came from discussions with the SNAP-Ed team about state-level initiatives, the councils and organizations they work with and their awareness of other initiatives. This information was supplemented through a review of recent community needs



assessments conducted by hospitals throughout the state, a web-based review of activities offered through local health departments, and Connecticut’s implementation of federal and state initiatives related to obesity prevention, nutrition and physical activity.

The final section identifies underserved / unserved populations by analyzing SNAP-Ed administrative program data to describe the location and intensity of programming for children and adults.

**Existing information (source, content, time frame):** Table A-1 and Table A-2 summarize the data sources, data year and the variables used the first and second sections in this report.

<b>Table A-1. Needs Assessment Data Sources: SNAP-Ed Target Audience</b>		
<b>Source</b>	<b>Content</b>	<b>Data Year(s)</b>
<b>SNAP Participants</b>		
State of Connecticut Department of Social Services, Eligibility management system reports from EMS and ImpaCT.	SNAP participant race and ethnicity, total participants by town	January 2018
Connecticut Department of Public Health, Annual Town and County Population for CT, 2016. Hartford, CT Connecticut Department of Public Health.	Annual population estimates by town	2016, estimates
U.S. Department of Agriculture, Food and Nutrition Service, Characteristics of Supplemental Nutrition Assistance Program Households: Fiscal Year 2016, by Sarah Lauffer. Project Officer, Jenny Genser. Alexandria, VA, 2017.	SNAP participants by age and SNAP households by age, race and Hispanic status of household head (from a quality control sample)	2016, Fiscal Year
<b>Target Population: Income-Eligible</b>		
CT DECD Research, income statistics using American Community Survey (ACS) 5-year estimates. Published June 5, 2017.	Median, mean, and per capita income by town	2011-2015
CT State Department of Education, Retrieved from the Connecticut Data Collaborative data.ctdata.org.	Free/Reduced Lunch participation by school and school district.	2016-2017, School Year

**Table A-2. State Specific Health Statistics Data Sources**

<b>Source</b>	<b>Content</b>	<b>Data Year</b>
Zheng X., Stone, C.L. (2017). <i>Health Indicators and Risk Behaviors in Connecticut: Results of the 2015 Behavioral Risk Factor Surveillance Survey</i> . Hartford, CT: Connecticut Department of Public Health	By income and race and ethnicity: Adult: weight status, diabetes, cardiovascular disease, cholesterol, hypertension, vegetable consumption, physical activity, Child: weight status, diet	2015
Stone, CL., ZuWallack, R., Archambault, G., Zheng, X. (2017) <i>Local Analysis of Selected Health Indicators: Results of the 2011-2015 Behavioral Risk Factor Survey</i> . Hartford, CT: Connecticut Department of Public Health	Adult weight status, cardiovascular disease, diabetes and physical activity by geographic area	2011-2015
<i>Connecticut School Health Survey, Youth Behavior Component. High School, weighted results</i> . Hartford, CT: Connecticut Department of Public Health	Children in high school: weight status, vegetable consumption and physical activities by income and race/ethnicity	2015
Poulin, S.M., Huie T., Phipps K., Dowd, E.A., & Peng, J. (2017). <i>Overweight and Obesity among Kindergarten and Third Grade Children in Connecticut, 2016-2017</i> . Hartford, CT: Connecticut Department of Public Health	Weight status among children in kindergarten and 3 <sup>rd</sup> grade in CT	2016-2017
Ferris, A.M., Havens, E., Wakefield, D.B., Quesada, C., Schilling, E., Cantor, C. (2017). <i>Child Weight Surveillance in Preschool in Hartford Connecticut. Completed May 2016 for the City of Hartford Department of Families, Children, Youth and Recreation</i> . Farmington, CT: UConn Health.	Child weight surveillance for preschool age children in Hartford.	2016
Wakefield, D.B., Havens, E. (2017). <i>Childhood Obesity and Asthma in the Consolidated School District of New Britain, Connecticut 2016-17</i> . Data analysis and report prepared by UConn Health Center for Public Health and Health Policy. Farmington, CT: UConn Health.	Child weight surveillance in pre-kindergarten, kindergarten, 1 <sup>st</sup> grade, 6 <sup>th</sup> grade and 9 <sup>th</sup> grade	2016-2017
Kaseta T, Smith S, Oldman S, Guo F, Duffy V. <i>Frequency of obesity in an urban pediatric emergency department (PED): BMI versus waist circumference percentiles</i> . Presented at the: Eastern Society for Pediatric Research (ESPR) 2018 Meeting, March 16-18, in Philadelphia, PA.	Overweight/obesity screening of children at an urban pediatric emergency department	2017

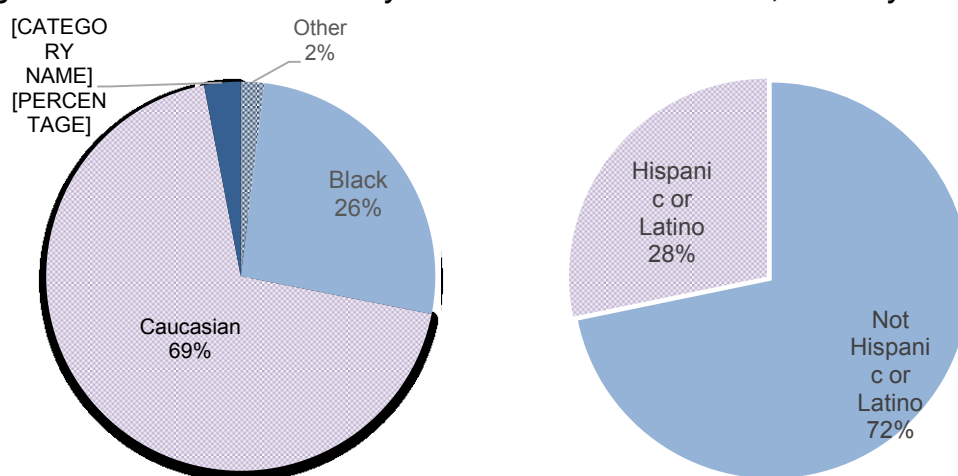
**New information collection (source and content):** not applicable.

## Needs Assessment Findings

### Demographic Characteristics of SNAP-Ed Target Audience

*SNAP Participant Race & Ethnicity.* State of Connecticut data for January 2018 recorded 394,874 persons participating in SNAP, living in 226,279 households.<sup>1</sup> Figure A-1 shows the racial and ethnic profile for heads of households with SNAP participants. Most commonly, heads of households identified as Caucasian (69%). Almost 30% of household heads identified as Hispanic or Latino and 26% identified as Black or African American.

*Figure A-1: Race and Ethnicity of the Head of Household, January 2018*

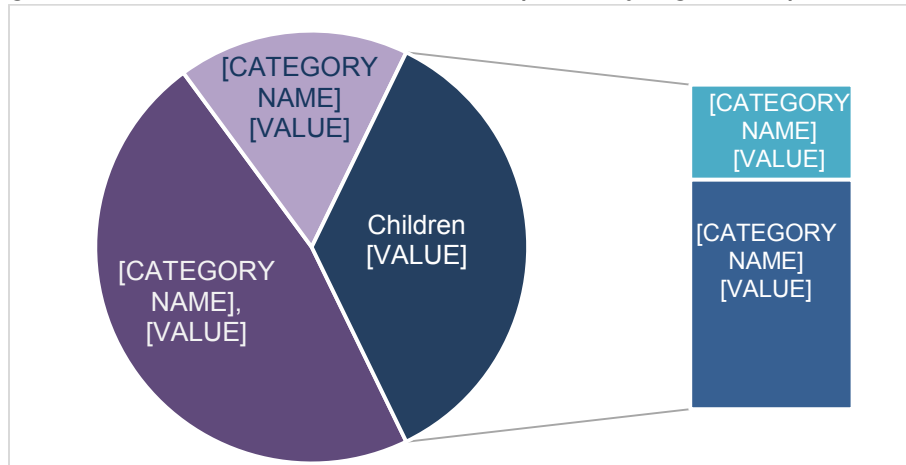


*SNAP Participant Age and Disability Status.* The USDA Food and Nutrition Service (FNS) report, “Characteristics of Supplemental Nutrition Assistance Program Households, FY 2016,” provides additional insight about the age of SNAP participants and composition of SNAP households by analyzing quality control sample data for each state. As shown in Figure A-2, the FY2016 quality control data analysis found almost half of the SNAP participants were non-elderly adults (ages 18-59) and 36% of participants were children. Twenty-five percent of participants were school age, 10% were pre-school age and 17% were older adults.<sup>2</sup>

<sup>1</sup>State of Connecticut Department of Social Services. (2018). Reports from EMS and ImpaCT Race Ethnicity Rpt-town summary-HOH for January 2018.

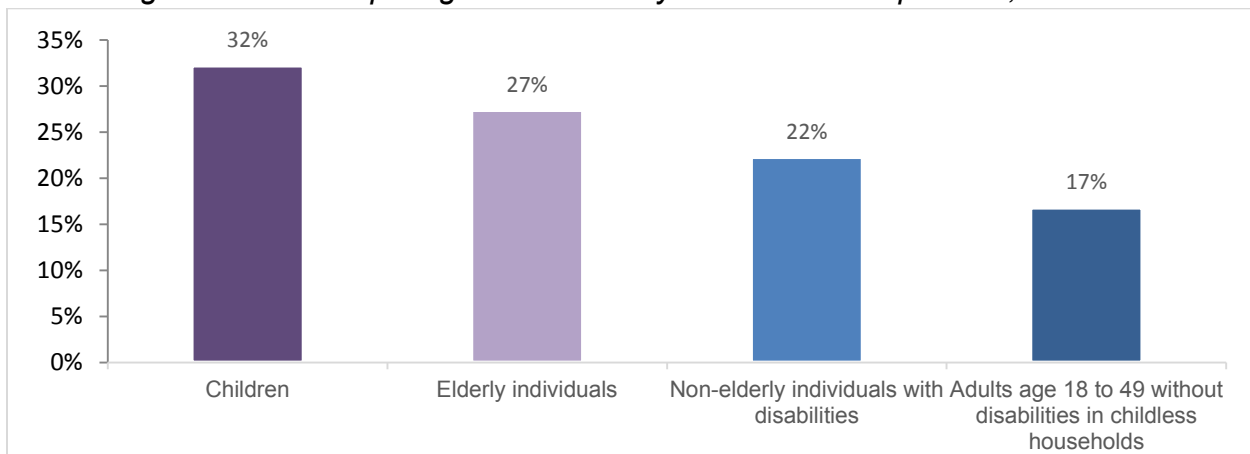
<sup>2</sup> U.S. Department of Agriculture, Food and Nutrition Service, Office of Policy Support, Characteristics of Supplemental Nutrition Assistance Program Households: Fiscal Year 2016, by Sarah Lauffer. Project Officer, Jenny Genser. Alexandria, VA, 2017. Report No. SNAP-17-CHAR

*Figure A-2. Connecticut SNAP Participants by Age Group, FY 2016*



The FY2016 FNS report also describes the composition of households participating in SNAP (Figure A-2). Almost one-third of SNAP households had children, 27% had older adults and 22% included non-elderly individuals with disabilities. Fewer SNAP households (17%) were comprised of childless adults, age 18-49, without a disability.

*Figure A-3. Participating households by household composition, FY 2016*



**Geographic Location of SNAP Participants.** The state of Connecticut has 169 towns with population size ranging from roughly 800 to 146,000.<sup>3</sup> This section identifies the towns where the most SNAP participants live and towns with the highest participation rate or SNAP prevalence. In January 2018, almost half of SNAP participants lived in one of five cities: Hartford, New Haven, Waterbury, Bridgeport and New Britain.<sup>4</sup>

<sup>3</sup> Connecticut Department of Public Health. Annual Town and County Population for CT, 2016, Connecticut Department of Public Health, Office of Hartford, CT.

<sup>4</sup> State of Connecticut Department of Social Services. (2018). Reports from EMS and ImpaCT Race Ethnicity Rpt-town summary-HOH for January 2018.

Hartford had almost 50,000 participants; 35,000-38,000 participants lived in New Haven, Waterbury and Bridgeport and 22,369 participants lived in New Britain. Almost 75% of SNAP participants lived in the 20 towns with the highest enrollment. Among these towns, enrollment varied widely from about 4,000 to 50,000. Figure A-4 shows the number of SNAP participants for each town in the “top 20.”

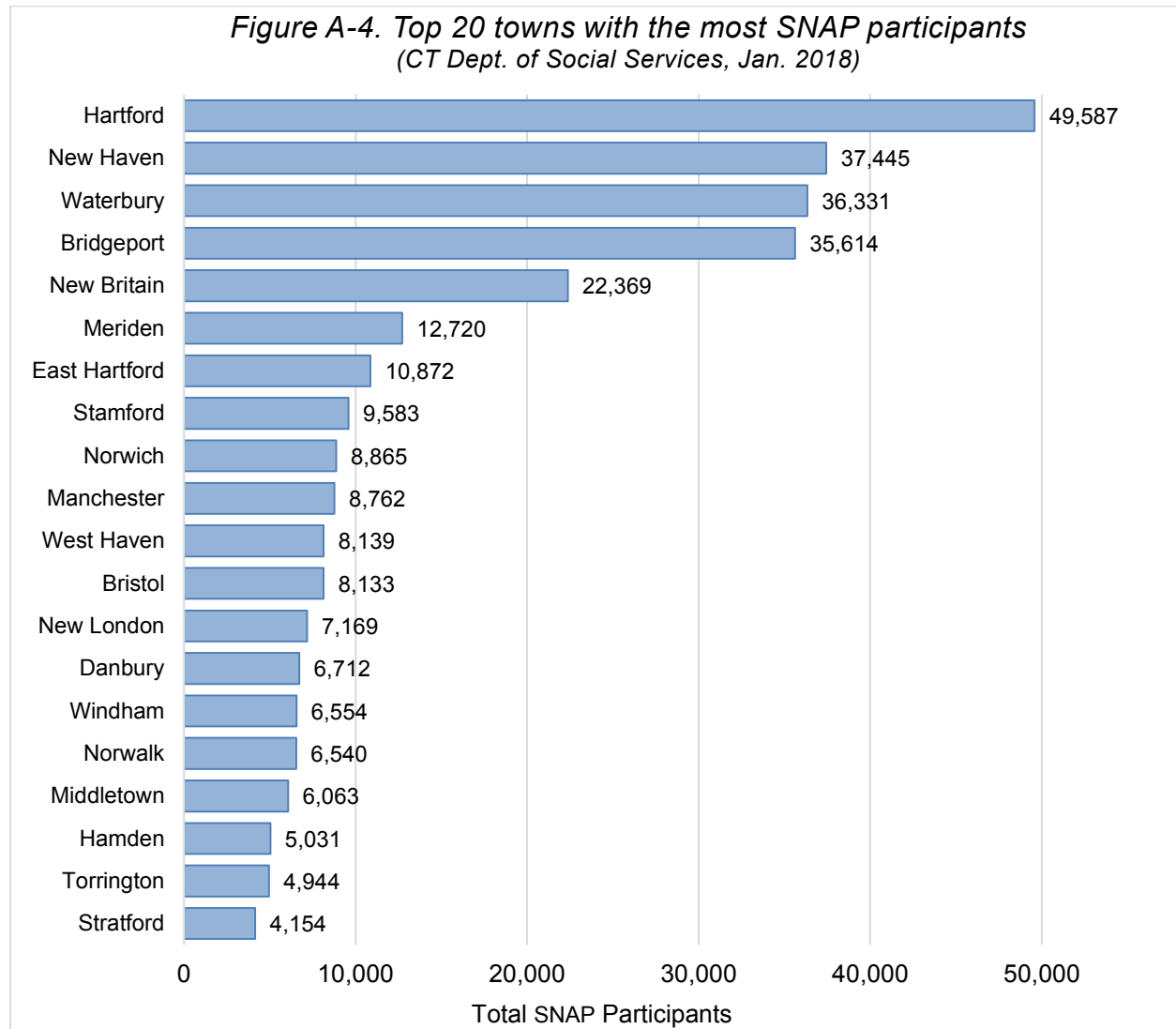
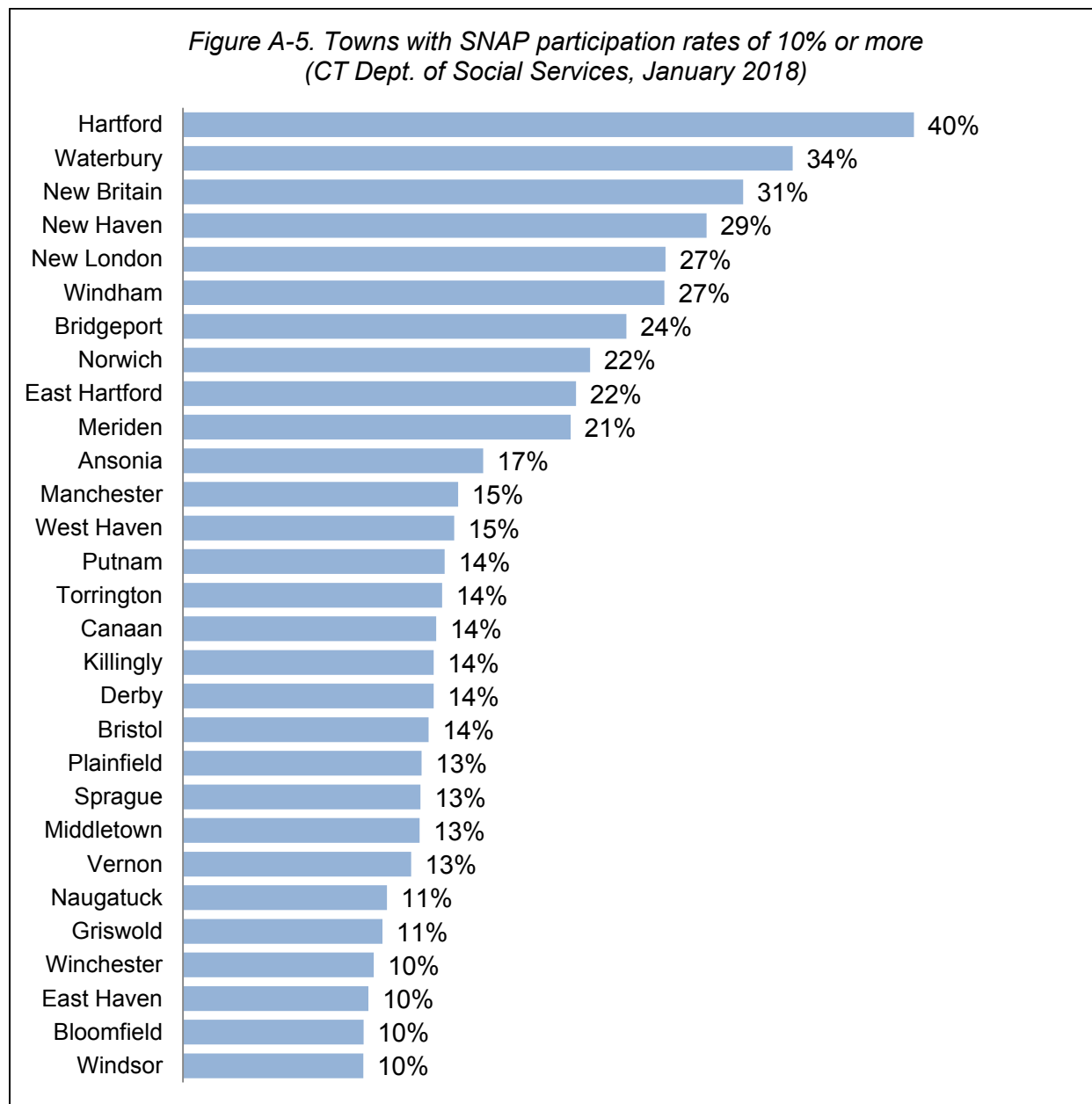


Figure A-5 shows the 29 towns with an estimated SNAP prevalence of 10% or more.<sup>5</sup> Six towns had very high SNAP participation with the prevalence exceeding 25% of the town population. These towns include four of the towns with the most participants (Hartford, Waterbury, New Britain and New Haven) as well as Windham and New London. SNAP prevalence was above 20% in Bridgeport (24%), Norwich (22%), East

<sup>5</sup> The SNAP participation rate was calculated using the total number of participants in town during January 2018 as the numerator and the 2016 town population from the Department of Public Health.

Hartford (22%), and Meriden (21%); and above 15% in Ansonia, West Haven and Manchester. In sixteen other towns, SNAP prevalence was between 10-14%.



*Towns with SNAP-Ed Eligible Population.* Using SNAP-Ed guidance, the SNAP-Ed eligible population includes towns with a significant low-income population and towns with a significant income eligible population. For this needs assessment, towns with a significant low-income population include those where the median household income<sup>6</sup>

<sup>6</sup> Connecticut 2015 Income by Towns. Data source: 2011-2015 American Community Survey (ACS) 5-year Estimates. Compiled by CT DECD Research (June 5, 2017)

was less than or equal to 185% of the federal poverty level for a family of four during 2015.<sup>7</sup> Towns with a significant income eligible population were those with school districts where the 2016-2017 National School Lunch Participation (NSLP) eligibility rates were 50% or greater.<sup>8</sup> Overall, twenty-one towns met the SNAP-eligibility criteria (Table A-3). The eight towns identified as having a significant low-income population also had a significant income eligible population based on NSLP eligibility. These towns include Hartford, Waterbury, New Britain, New Haven, Bridgeport, New London, Windham and Ansonia. The 13 additional towns include Danbury, Derby, East Hartford, East Haven, Manchester, Meriden, Norwalk, Norwich, Putnam, Stamford, Torrington, West Haven and Winchester.

<b>Table A-3. Towns with SNAP-Ed Eligible Populations</b>		
<b><i>Low Income: General Population</i></b>	<b><i>Income Eligible: Child Population</i></b>	
Ansonia	Ansonia	Danbury
Bridgeport	Bridgeport	Derby
Hartford	Hartford	East Hartford
New Britain	New Britain	East Haven
New Haven	New Haven	Manchester
New London	New London	Meriden
Waterbury	Waterbury	Norwalk
Windham	Windham	Norwich
		Putnam
		Stamford
		Torrington
		West Haven
		Winchester

*Town-Level Potential for Reaching the SNAP-Ed target population.* This section summarizes the potential for the SNAP-Ed target population through outreach in specific Connecticut towns. Each town was assigned to one of six priority groups based on total SNAP participants, prevalence of SNAP participants and presence of SNAP-eligible populations in the town (Figure A-6).

- *Priority Group 1* towns must have at least 20,000 SNAP participants and/or high SNAP participation greater than 25% of the town population. Towns must also meet the criteria for being a SNAP-Ed eligible town based on both high National School Lunch Program participation rates and low median household incomes.

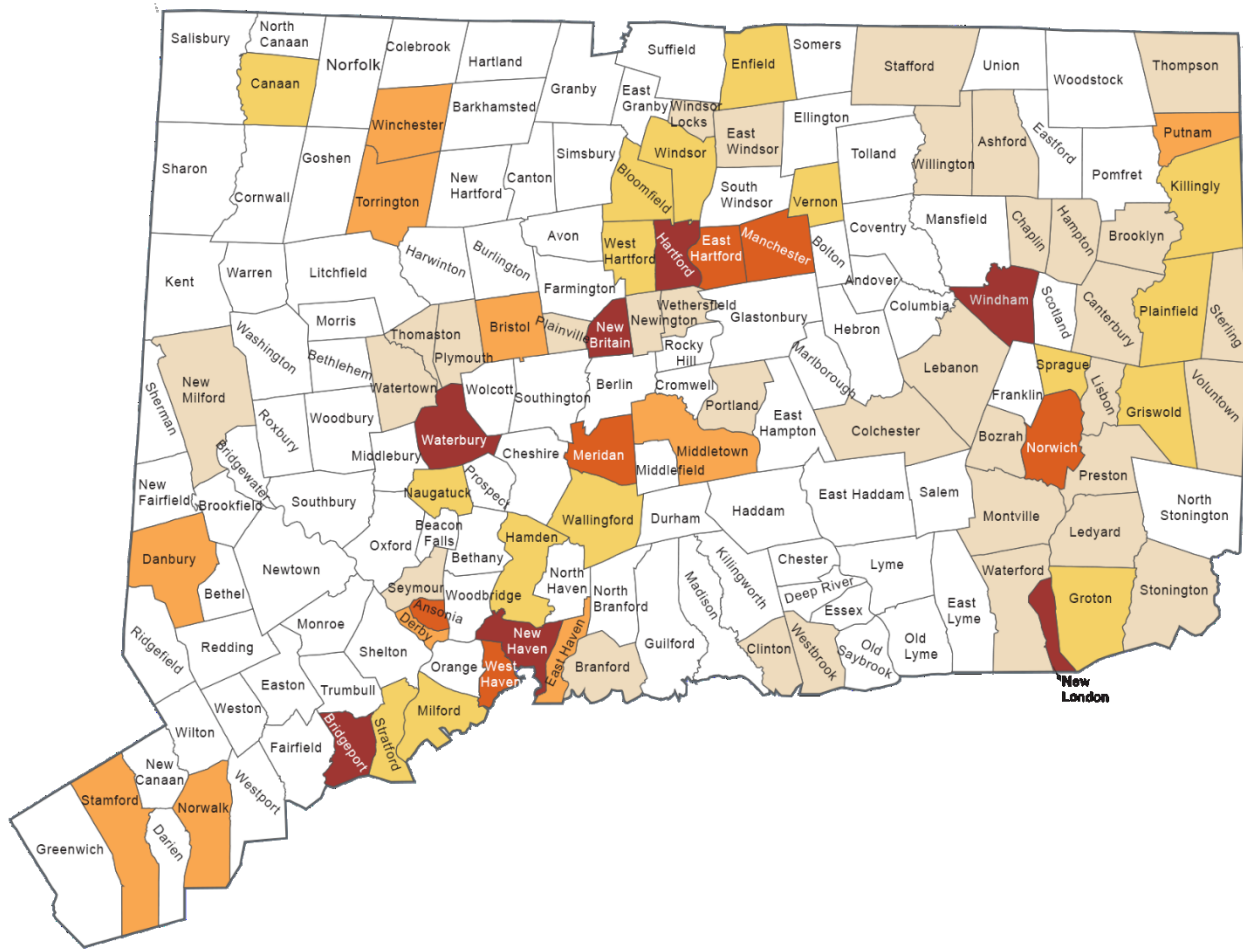
<sup>7</sup> Prior HHS Poverty Guidelines and Federal Register References. (U.S. DHHS). Retrieved May 5, 2018 from: <https://aspe.hhs.gov/prior-hhs-poverty-guidelines-and-federal-register-references>. Note: \$24,250 was the 2015 income threshold for a family of four.

<sup>8</sup> Connecticut Data Collaborative. Educational Need. Year: 2016-2017 Indicator of Educational Need: Eligible for Free or Reduced Price Lunch. Source: Connecticut State Department of Education. Retrieved March 19, 2018 from: <http://data.ctdata.org>.

- *Priority Group 2* towns must have high SNAP prevalence of at least 15-24%, meet the SNAP-eligible town criteria based on high National School Lunch Program participation rates and have at least 8,000 SNAP participants OR meet the SNAP-Ed eligible town criteria based on low median household incomes.
- *Priority Group 3* towns must meet the SNAP-eligible town criteria based on high National School Lunch Program participation rates OR the town must have more than 5,000 SNAP participants and at least 10% SNAP participation.
- *Priority Group 4* towns have a minimum of 2,000 SNAP participants and a participation rate of at least 5% OR at least 10% SNAP participation and fewer than 2,000 SNAP participants. These towns do not meet either criterion for being a SNAP-Ed eligible town.
- *Priority Group 5* towns have a minimum of 2,000 SNAP participants OR a SNAP participation rate greater than 5%. These towns do not meet both criteria nor do they meet the definition of a SNAP-Ed eligible town.
- *Priority Group 6* towns include all remaining towns that did not meet the criteria for groups 1-5.



Figure A-6. Town-Level Potential for Reaching the SNAP target population



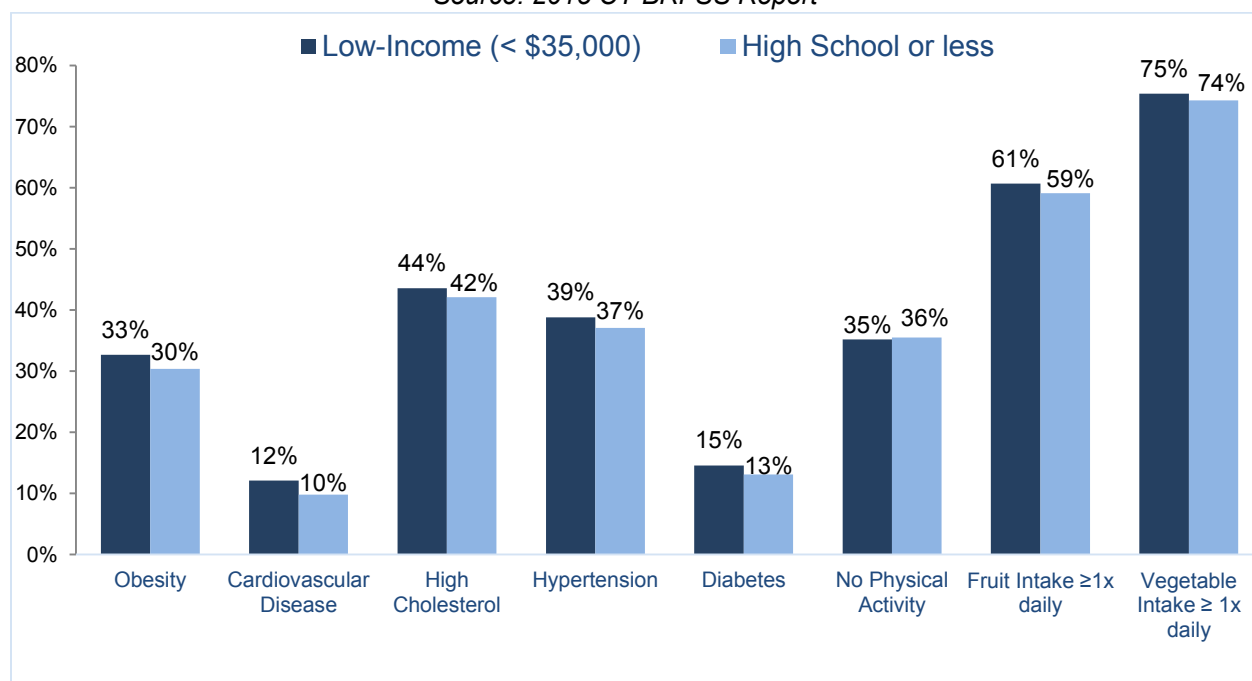
Priority Group	SNAP participants (% , n)	Towns
1	49.4% 195,069	7 Bridgeport, Hartford, New Britain, New Haven, New London, Waterbury, Windham
2	13.3% 52,454	6 Ansonia, East Hartford, Manchester, Meriden, Norwich, West Haven
3	12.4% 49,130	10 Bristol, Danbury, Derby, East Haven, Middletown, Norwalk, Putnam, Stamford, Torrington, Winchester
4	10.7% 42,312	16 Bloomfield, Canaan, Enfield, Griswold, Groton, Hamden, Killingly, Milford, Naugatuck, Plainfield, Sprague, Stratford, Vernon, Wallingford, West Hartford, Windsor
5	6.2% 24,517	33 Ashford, Bozrah, Branford, Brooklyn, Canterbury, Chaplin, Clinton, Colchester, East Windsor, Hampton, Lebanon, Ledyard, Lisbon, Montville, New Milford, Newington, Plainville, Plymouth, Portland, Preston, Seymour, Stafford, Sterling, Stonington, Thomaston, Thompson, Voluntown, Waterford, Watertown, Westbrook, Wethersfield, Willington, Windsor Locks
6	8.0% 31,392	97 Remaining towns

## State-Specific Diet-Related Health Statistics on Target Population

### Target Population of Adults

The prevalence of diet-related conditions among the adult SNAP-Ed target population is reported using the 2015 Connecticut BRFSS Report results for adults with incomes less than \$35,000 and adults with no more than a high school (H.S.) degree. The 2015 BRFSS results show that adults from these SNAP-Ed target populations face a significantly higher prevalence of obesity and chronic conditions such as cardiovascular disease and diabetes, when compared to adults who had higher incomes or more than a H.S. education. The SNAP-Ed target population was also more likely to report having no leisure time physical activity and were less likely to report eating fruits and vegetables on a daily basis.<sup>9</sup> The prevalence of diet-related health conditions and health behaviors among these populations is presented in Figure A-7.

Figure A-7. CT SNAP-Ed Target Population: Prevalence of diet-related health conditions & behaviors  
Source: 2015 CT BRFSS Report<sup>10</sup>



Overall, the prevalence of chronic disease and health-related behaviors among low-income adults and those with less education were similar. For diet-related health conditions, in comparison to adults earning more than \$75,000, adults with low-incomes were significantly more likely to report a cardiovascular disease diagnosis (12% vs. 4%),

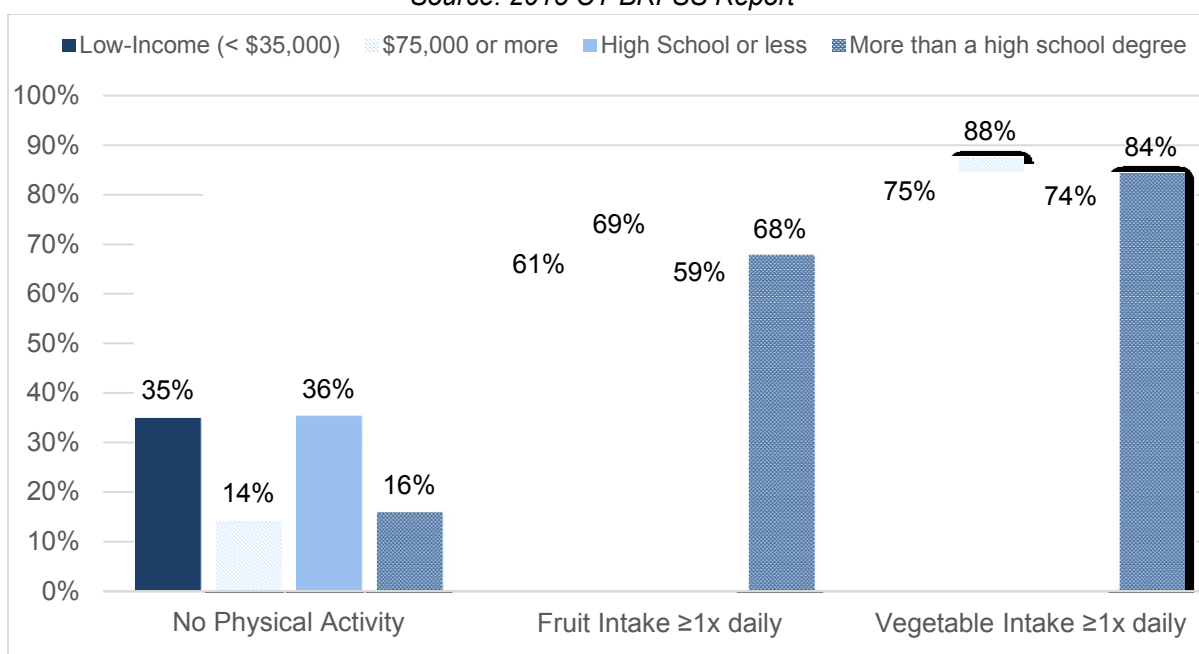
<sup>9</sup> Zheng X., Stone, C.L. (2017). *Health Indicators and Risk Behaviors in Connecticut: Results of the 2015 Behavioral Risk Factor Surveillance Survey*. Hartford, CT: Connecticut Department of Public Health.

<sup>10</sup> Zheng X., Stone, C.L. (2017). *Health Indicators and Risk Behaviors in Connecticut: Results of the 2015 Behavioral Risk Factor Surveillance Survey*. Hartford, CT: Connecticut Department of Public Health.

high blood cholesterol levels (44% vs. 34%), diabetes (15% vs. 6%) and being obese (33% vs. 23%). Similarly, adults with a H.S. degree or less had a higher risk for cardiovascular disease (10% vs. 6%), high blood cholesterol levels (42 vs. 35%), and diabetes (13% vs. 7%) when compared to adults with more than a H.S. education.<sup>11</sup>

Figure A-8 shows BRFSS results for the self-reported prevalence of daily fruit and vegetable consumption and not participating in physical activities or exercises by income and education group. Compared to adults with incomes of \$75,000 or more, adults with low-incomes were significantly less likely to report eating fruit (61% vs. 69%) or vegetables at least once daily (75% vs 88%). They were also significantly more likely to report having no physical activity outside of work (35% vs. 14%). Similarly, adults with low educational attainment were significantly less likely to report eating fruit (59% vs. 68%) or vegetables (74% vs. 84%) each day and significantly more likely to report no physical activity outside of work (36% vs. 16%) than adults with education beyond H.S.

Figure A-8. Prevalence of Physical Activity and Dietary Behaviors by Income and Education Level  
Source: 2015 CT BRFSS Report<sup>12</sup>



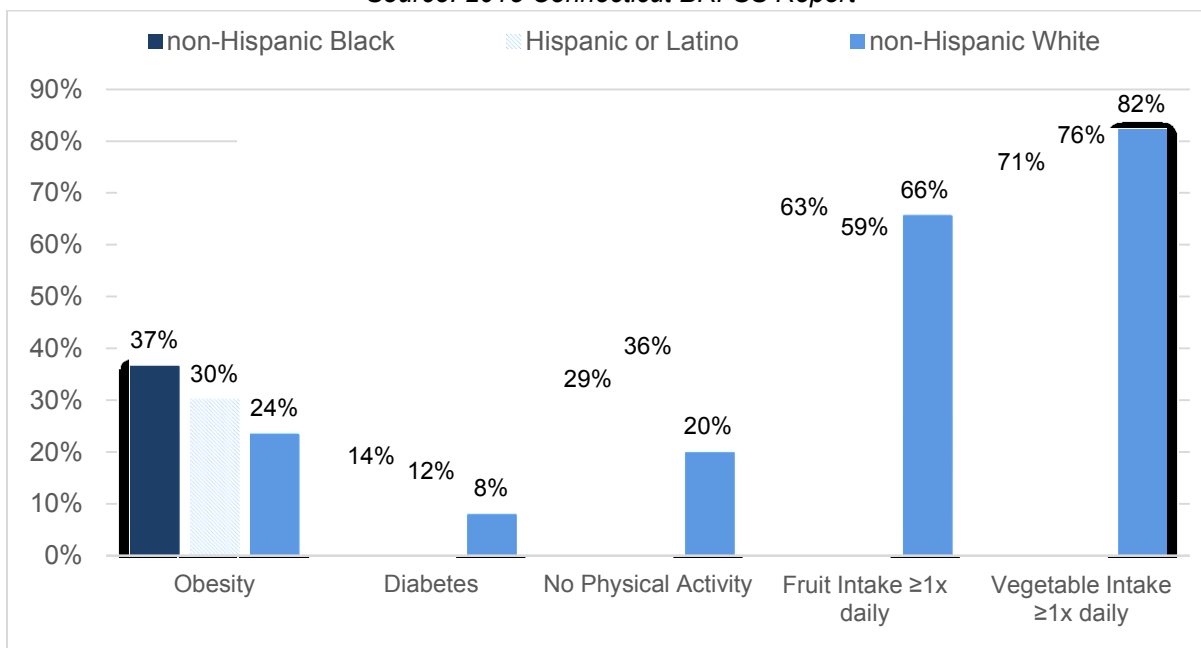
**Racial and ethnic disparities:** The 2015 Connecticut BRFSS Report also identified racial and ethnic disparities for several diet-related health conditions and behaviors. These disparities are relevant to the SNAP-Ed needs assessment because 28% of the SNAP population is Hispanic or Latino and 26% is Black or African American. As shown in

<sup>11</sup> Zheng X., Stone, C.L. (2017). *Health Indicators and Risk Behaviors in Connecticut: Results of the 2015 Behavioral Risk Factor Surveillance Survey*. Hartford, CT: Connecticut Department of Public Health.

<sup>12</sup> Zheng X., Stone, C.L. (2017). *Health Indicators and Risk Behaviors in Connecticut: Results of the 2015 Behavioral Risk Factor Surveillance Survey*. Hartford, CT: Connecticut Department of Public Health.

Figure A-9, adults who were either Hispanic or Latino or non-Hispanic Black had a significantly higher risk of obesity, diabetes, and having no physical activity outside of work when compared to non-Hispanic whites. In addition, adults who identified as non-Hispanic Black (71%) and Hispanic or Latino (76%) were significantly less likely to eat vegetables at least once daily compared to non-Hispanic White adults (82%). Adults who were Hispanic or Latino were also significantly less likely to eat fruit at least once daily than non-Hispanic Whites (59% vs. 66%).

**Figure A-9 – Chronic Conditions, Health Behaviors and Racial and Ethnic Disparities**  
 Source: 2015 Connecticut BRFSS Report



**Age-related disparities:** The 2015 Connecticut BRFSS Report also presents the prevalence of diet-related health conditions and behaviors for various age groups. The differences may be informative for tailoring interventions for adults in different age groups. In 2015, adults who were 55 or older had significantly higher risk for cardiovascular disease (15% vs. 3%), diabetes (17% vs. 7%), high blood cholesterol (51% vs. 32%) and having no leisure time physical activity (27% vs. 23%) compared to adults ages 35-54. Conversely, older adults were significantly more likely to eat fruit and vegetables on a daily basis when compared to 18-34 year olds and 34-54 year olds.

**Geographic disparities:** In 2017, the Department of Public Health released the report, *Local Analysis of Selected Health Indicators*.<sup>13</sup> This report presents pooled BRFSS

<sup>13</sup> Stone, CL., ZuWallack, R., Archambault, G., Zheng, X. (2017) *Local Analysis of Selected Health Indicators: Results of the 2011-2015 Behavioral Risk Factor Survey*. Hartford, CT: Connecticut Department of Public Health.

results from 2011-2015 to identify the prevalence of six health status indicators, seven health risk behaviors and four chronic conditions in 53 local areas. The local areas were determined based on sample size and similarity of demographics and geographic location. If a town had at least 500 survey respondents, that town was a local area. In consultation with local health directors, towns with fewer than 500 survey respondents were grouped with towns that had roughly similar demographics and geographic location whenever possible. (For additional detail on the methods used, please refer to the DPH report).<sup>14</sup>

- Health status indicators included self-reported good or better general health, good physical health, good mental health, healthy weight, health care coverage and least one personal doctor.
- Chronic condition indicators included self-reports of a current diagnosis of asthma as well as ever having a medical diagnosis of diabetes, cardiovascular disease, arthritis, depression, chronic obstructive pulmonary disorder or cancer.
- Health risk behavior indicators included the self-reported prevalence of having no leisurely physical activity during the past month, excessive alcohol consumption in past month, current cigarette smoking and having ever used hookah.

For the SNAP-Ed needs assessment, the results in the DPH report were used to group local areas into four risk levels based on prevalence of healthy weights, physical activity and having multiple health status, chronic condition or health risk behavior indicators that are worse than the state prevalence. The criteria for the risk levels were as follows:

- **Risk Level 1:** Local areas in this group had a significantly lower prevalence of healthy weights when compared to the state prevalence OR had a lower prevalence of healthy weights that was not statistically significant AND a significantly worse prevalence for at least 3 health status indicators, at least 2 chronic conditions or at least 2 health risk behavior indicators when compared to the state prevalence.
- **Risk Level 2:** Local areas in this group had both a lower prevalence of healthy weights that was not statistically significant when compared to the state prevalence AND a higher prevalence of adults who reported no physical activity during their leisure time than the state prevalence. *Note: Differences for physical activity were not always statistically significant.*
- **Risk Level 3:** Local areas in this group had a lower prevalence of healthy weights that was not statistically significant but did not have a higher prevalence of adults who reported no physical activity during their leisure time than the state prevalence.
- **Risk Level 4:** Local areas not meeting the criteria of levels 1, 2 or 3.

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<sup>14</sup> <http://www.portal.ct.gov/-/media/Departments-and-Agencies/DPH/BRFSS/BRFSSCTLocalAnalysis20112015pdf.pdf?la=en>

Using the risk level assigned to each of the local areas, the risk level for each CT town was identified. The following table, Table A-4, summarizes the risk level for the towns in each SNAP-Ed priority group. The 13 towns in Priority Groups 1 and 2 meet the criteria for either Risk Level 1 or 2.

<b>Table A-4. Risk Level for SNAP-Ed Priority Towns</b>						
<b>Risk Level</b>	<b>Priority Groups for Reaching the SNAP-Ed Target Audience in Connecticut Towns</b>					
	<b>Group 1</b>	<b>Group 2</b>	<b>Group 3</b>	<b>Group 4</b>	<b>Group 5</b>	<b>Group 6</b>
<b>Risk 1</b>	Bridgeport Hartford New Britain New Haven New London Waterbury Windham	Ansonia Manchester Meriden Norwich West Haven	Derby Middletown Putnam Torrington Winchester	Griswold Groton Killingly Naugatuck Plainfield Sprague Vernon	Lisbon Montville Preston Seymour Sterling Thompson Voluntown	Franklin, Orange
<b>Risk 2</b>		East Hartford	Bristol, Norwalk	Enfield	East Windsor Plainville Plymouth Thomaston Watertown Windsor Locks	Beacon Falls, Ellington, Shelton, Somers, Suffield, South Windsor, Southington, Wolcott
<b>Risk 3</b>				Bloomfield Hamden Stratford Wallingford Windsor	Ashford Chaplin Colchester Ledyard Portland Waterford	Andover, Bolton, Chester, Columbia, Coventry, Durham, East Haddam, East Hampton, East Lyme; Haddam, Hebron, Marlborough, Middlefield, North Haven, Scotland, Tolland
<b>Risk 4</b>			Danbury East Haven Stamford	Canaan Milford West Hartford	Branford, Brooklyn, Bozrah Canterbury Clinton Hampton Lebanon New Milford, Newington Stafford Stonington Westbrook	Remaining towns

					Wethersfield Willington	
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## Target Population of Children

**Obesity and Overweight.** The weight status of the SNAP-Ed target population of children is approximated using the following data sources: a 2016 BMI surveillance report of preschool children in Hartford; a 2016-17 BMI surveillance report of children in New Britain schools; a 2017 DPH surveillance study of weight status among kindergarten and 3<sup>rd</sup> grade children; the 2015 Youth Risk Behavior Survey (YRBS), and results from a convenience sample of children at a pediatric emergency department located in a priority group 1 town.

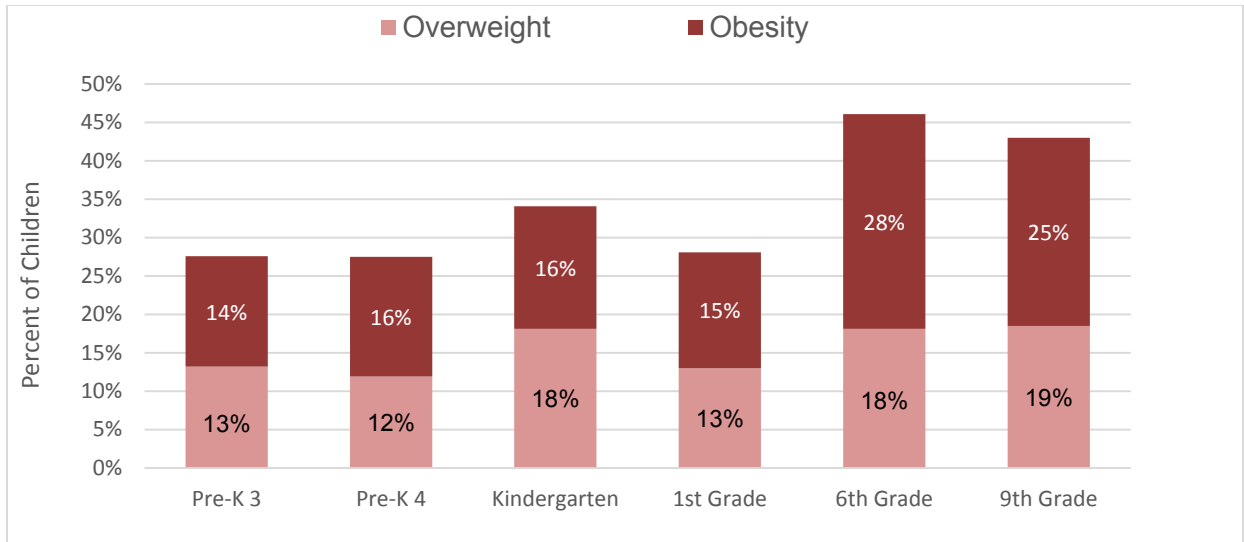
The BMI surveillance studies conducted in two SNAP-Ed priority group 1 towns, Hartford (May 2016) and New Britain (2016-17 school year), found high rates of childhood overweight and obesity among children in preschools. In Hartford, 32% of preschool children were overweight or obese.<sup>15</sup> In New Britain, 28% of preschool age children were overweight or obese. For the New Britain surveillance project, the weight status of children in kindergarten, 1<sup>st</sup> grade, 6<sup>th</sup> grade and 9<sup>th</sup> grade was also reported. As shown in Figure A-10, during the 2016-17 school year, the prevalence of being overweight or obese varied from 27% of children in Pre-K 3 to 46% of children in 6<sup>th</sup> grade. Looking at obesity alone, one out of every four children in New Britain's 6<sup>th</sup> and 9<sup>th</sup> grade were obese.<sup>16</sup>

*Figure A-10. Prevalence of overweight / obesity among New Britain Children, 2016/2017*

<sup>15</sup> Ferris, A.M., Havens, E., Wakefield, D.B., Quesada, C., Schilling, E., Cantor, C. (2017). *Child Weight Surveillance in Preschool in Hartford Connecticut. Completed May 2016 for the City of Hartford Department of Families, Children, Youth and Recreation.* Farmington, CT: UConn Health.

<sup>16</sup> Wakefield, D.B., Havens, E. (2017). *Childhood Obesity and Asthma in the Consolidated School District of New Britain, Connecticut 2016-17.* Data analysis and report prepared by UConn Health Center for Public Health and Health Policy. Farmington, CT: UConn Health.





During 2017, the Connecticut Department of Public Health completed more than 4,400 BMI measurements of kindergarten and third grade students at 42 schools using a sampling approach designed to generate statewide estimates.<sup>17</sup> In the Connecticut sample, 28% of children in kindergarten and 35% of children in 3<sup>rd</sup> grade were overweight or obese (Figure A-11). At schools where eligibility for the free/reduced lunch program (FRLP) was 50% or more, the prevalence of almost 34% of kindergarten and 43% of third grade were overweight or obese.<sup>18</sup> In kindergarten, both Latino children (39%) and Black children (31%) were significantly more likely to be overweight or obese than White children (22%). Notably, DPH’s statewide results for Black children, Hispanic children and children in schools with at least 50% eligibility for the National School Lunch Program are quite similar to the prevalence observed in New Britain for children in kindergarten (34%) and for children in 3<sup>rd</sup> grade during 2015-16 (38%).<sup>19</sup>

Figure A-11. Overweight and Obesity among Kindergarten and Third Grade Children in Connecticut  
Source: DPH, 2017

<sup>17</sup> Poulin, S.M., Huie T., Phipps K., Dowd, E.A., & Peng, J. (2017). *Overweight and Obesity among Kindergarten and Third Grade Children in Connecticut, 2016-2017*. Hartford, CT: Connecticut Department of Public Health

<sup>18</sup> Poulin, S.M., CT Department of Public Health. Email correspondence June 6, 2018.

<sup>19</sup> Wakefield, D.B., Havens, E. (2016). *Childhood Obesity and Asthma in the Consolidated School District of New Britain, Connecticut 2015-16*. Data analysis and report prepared by UConn Health Center for Public Health and Health Policy. Farmington, CT: UConn Health.

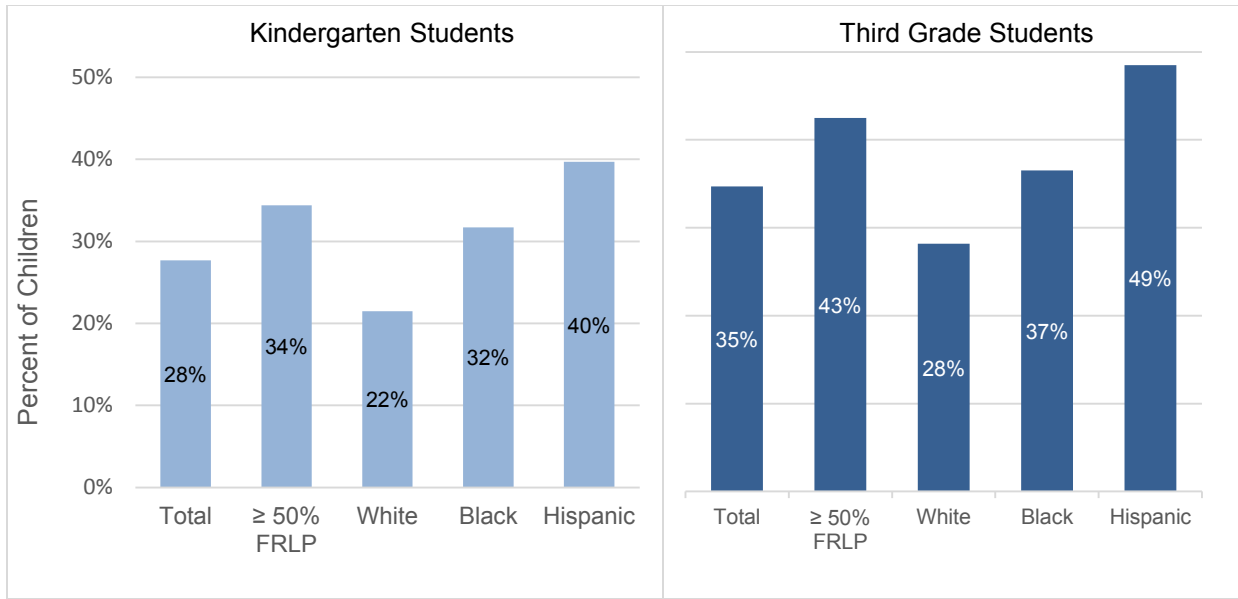
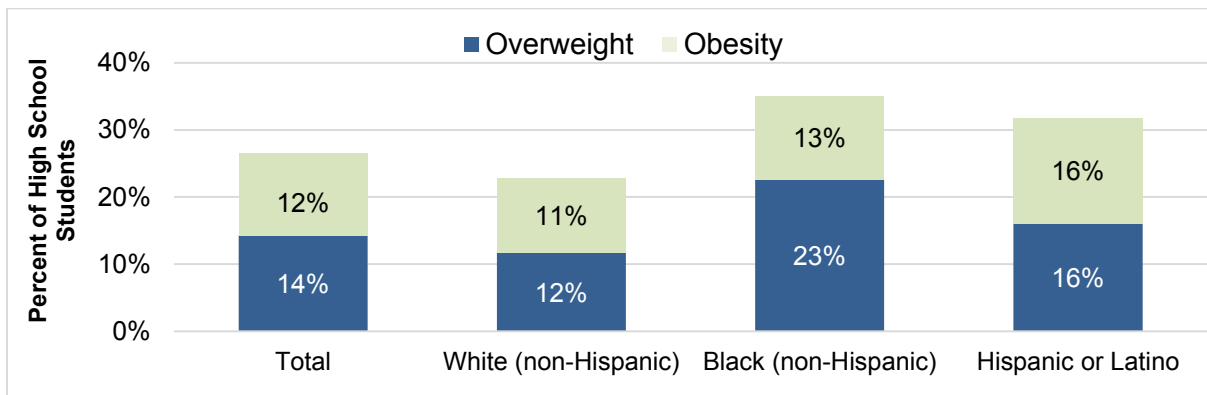


Figure A-12 shows the 2015 YRBS results for high school students overall and by race/ethnicity. In 2015, the statewide prevalence of being overweight or obese was 36% among Black high school students, 32% among Hispanic/Latino students and 23% among White students.<sup>20</sup> Although these differences by race and ethnicity were not statistically significant, they may better reflect the prevalence among the SNAP-Ed target population in Connecticut. For example, the prevalence among New Britain students in 9<sup>th</sup> grade during the 2016-17 school year was 45% and the rate of being overweight or obese among a sample of 13 - 18 year old children at a Hartford pediatric emergency department was 33% (Figure A-13).<sup>21</sup>

Figure A-12. CT Prevalence of Overweight & Obesity among High School Students (Source: YRBS 2015)



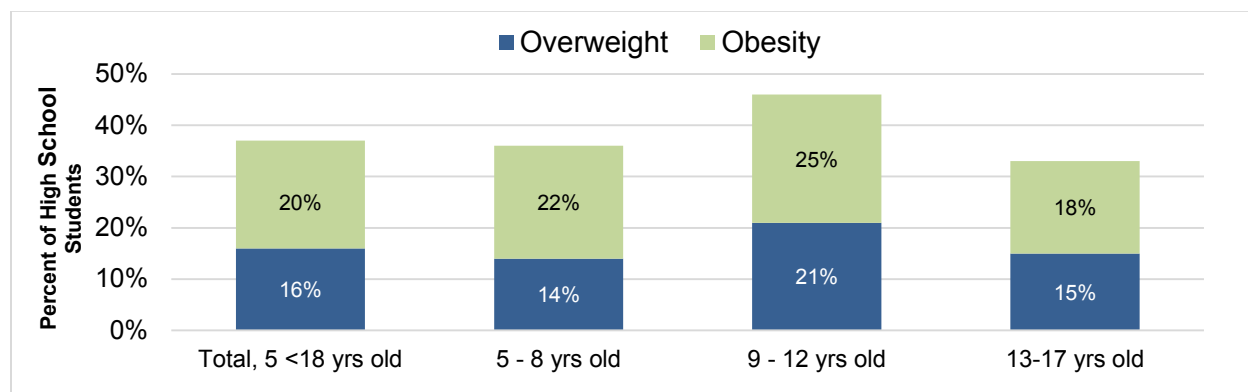
<sup>20</sup> Connecticut School Health Survey, Youth Behavior Component. High School, weighted results.

Hartford, CT: Connecticut Department of Public Health

<sup>21</sup> Kaseta T, Smith S, Oldman S, Guo F, Duffy V. Frequency of obesity in an urban pediatric emergency department (PED): BMI versus waist circumference percentiles. Presented at the: Eastern Society for Pediatric Research (ESPR) 2018 Meeting, March 16-18, in Philadelphia, PA.

Figure A-13 summarizes the results of measuring the weight status of children at a pediatric emergency department in Hartford, a SNAP-Ed priority town. A total of 925 children of various ages participated, more than half of whom had public health insurance.<sup>22</sup> Grouped by age range, 36% of children ages 5-8, 46% of children ages 9-12, and 33% of children ages 13-17 were overweight or obese.<sup>23</sup> These findings are similar to those observed in New Britain for children in kindergarten (34%) and 6<sup>th</sup> grade (46%).

Figure A-13. Assessment of Child Weight Status at a Pediatric Emergency Department in Hartford



**Diet and Physical Activity.** The prevalence of dietary behaviors and physical activity among the SNAP-Ed target population of children is described using results from the 2015 Connecticut BRFSS Report and the 2015 YRBS survey results for children in households with incomes <\$35,000 and by racial/ethnic disparities. The 2015 CT BRFSS Report shows that 39% of children in low-income households (adult proxy income of less than \$35,000) drank soda or sugary drinks (SSBs) on a daily basis, 36% ate fast food 2-3 times per week and 55% had excessive screen time of over two hours of TV each day. Non-Hispanic Black children were significantly more likely to consume SSBs on a daily basis and have excessive screen time compared to non-Hispanic White children.<sup>24</sup>

The same year, 65% of Connecticut high school students reported eating vegetables on a daily basis (in the seven days prior to the YRBS survey). Students who were non-Hispanic White (72%) were significantly more likely to consume vegetables daily than

<sup>22</sup> Kaseta T, Smith S, Oldman S, Guo F, Duffy V. *Frequency of obesity in an urban pediatric emergency department (PED): BMI versus waist circumference percentiles*. Presented at the: Eastern Society for Pediatric Research (ESPR) 2018 Meeting, March 16-18, in Philadelphia, PA.

<sup>23</sup> Duffy, Valerie. "Re: SNAP-Ed Needs Assessment Data Request." Message to Erin Havens. April 12, 2018. E-mail.

<sup>24</sup> Zheng X., Stone, C.L. (2017). *Health Indicators and Risk Behaviors in Connecticut: Results of the 2015 Behavioral Risk Factor Surveillance Survey*. Hartford, CT: Connecticut Department of Public Health

students who were Black/African American (46%) or Hispanic/Latino (55%).<sup>25</sup> When asked about physical activity in the past week, only 45% of high school students reported being active for at least 60 minutes on five or more days. More than half of non-Hispanic White students reported being active whereas closer to one-third of high school students who identified as non-Hispanic Black (37%) or Hispanic/Latino (35%) reported being active.<sup>26</sup>

## Other Nutrition-Related Programs Serving Low-Income Persons

There are a number of state and local level initiatives designed to provide nutrition education, promote physical activity and enhance the food environment. At the state-level, commitment to policy, systems and environment (PSE) efforts are exemplified by the CDC-funded SHAPE Partnership coordinated by the state Department of Public Health (DPH) and the Coordinated School Health Program administered by the state Department of Education (SDE). Since 2013, the SHAPE Partnership has worked with schools, early care programs, hospitals, health centers and worksites to improve PSE in a number of ways, including but not limited to promoting:

- Adoption of food service guidelines and nutrition standards
- Increasing physical activity and physical education in schools;
- Improving access to healthier food at the retail level by collaborating with local food stores and increasing the number of WIC vendors and farmers accepting WIC produce vouchers
- Creating and enhancing access to places for physical activity; and
- Reducing the environmental barriers to breastfeeding

These efforts place emphasis on improving the health of populations at higher risk for chronic disease, such as low-income populations. In collaboration with SHAPE activities, Connecticut's Coordinated School Health Program, also a CDC initiative, focuses in part, on increasing "the capacity of school districts and schools to implement policies, practices and programs to promote physical activity [and] improve nutrition." Beyond the SHAPE Partnership and Coordinated School Health Program, there are many additional efforts focused on obesity prevention, nutrition and physical activity. Nutrition programs in the state include WIC, SNAP, the Child Nutrition Program, the Elderly Nutrition Program, Meals on Wheels, community congregate cafes, two large food banks and numerous food pantries and soup kitchens. State level programs that provide nutrition education along with food subsidies include WIC and SNAP. Local WIC agencies and an increasing number of farmers markets that accept WIC and/or SNAP are located in many of the towns with the highest participation in SNAP. Nutrition

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<sup>25</sup> *Connecticut School Health Survey, Youth Behavior Component. High School, weighted results.* Hartford, CT: Connecticut Department of Public Health

<sup>26</sup> *Connecticut School Health Survey, Youth Behavior Component. High School, weighted results.* Hartford, CT: Connecticut Department of Public Health

education may also be available to the SNAP target population through the UCONN Expanded Food & Nutrition Education Program (EFNEP), SDE or DPH initiatives, CT School Readiness Program, Discovery Communities, Head Start and Early Head Start Programs, some local health departments, health care providers or institutions and University or community-based public health initiatives. In addition, Connecticut Food Corps collaborates with schools in many of the state's highest need towns to help facilitate healthy school environments through hands-on lessons and promoting access to healthy school meals.

Other local nutrition education programs for children found in SNAP-Ed priority towns include, but are not limited to *KIDS' FANS*, *Fit Kids*, *Y Be Fit* and *You Go Girl*. There are also a number of nutrition education programs for adults and families such as *Healthy for Life*, *Growing Gardens Growing Health* and *Fit 5*. Examples of local level initiatives to promote physical activity include *Fit Together*, *Become a NorWALKER*, *Live Well* and *Get Healthy CT* as well as the development and revival of designated walking, biking and other community recreational areas.

The state SNAP-Ed Program is strategically integrated with DPH and EFNEP and has long-standing collaborations with other nutrition-related programs to expand the reach and comprehensiveness of obesity and chronic disease prevention initiatives. This includes collaborations with state and community-level agencies serving the target population, such as the DSS Healthy Aging Program, State Department of Education, the City of Hartford and other local level health and/or human service programs in a number of towns. SNAP-Ed partners also participate in planning efforts for over a dozen statewide councils such as the statewide ECE Nutrition & Physical Activity Planning Team, the SDE School Breakfast Program, the CT WIC Vendor Advisory Council, the CT Coalition Against Childhood Obesity, the CT Food Policy Council, FoodSHARE, the CT Food Corps, and the Community Health Center Association of CT. Select other planning efforts include participation on the SNAP Regional Advisory Board, many of CT's local food policy councils, school wellness committees in several SNAP-Ed priority towns, and more than a dozen initiatives in Hartford ranging from the city-level to a school-level governance council to neighborhood-based initiatives.

Although existing collaborations are strong, further exploration of how SNAP-Ed might further complement efforts under the Coordinated School Health Program, the SHAPE Partnership, with at-risk neighborhoods, or within the early care environment and other initiatives appear worthwhile.

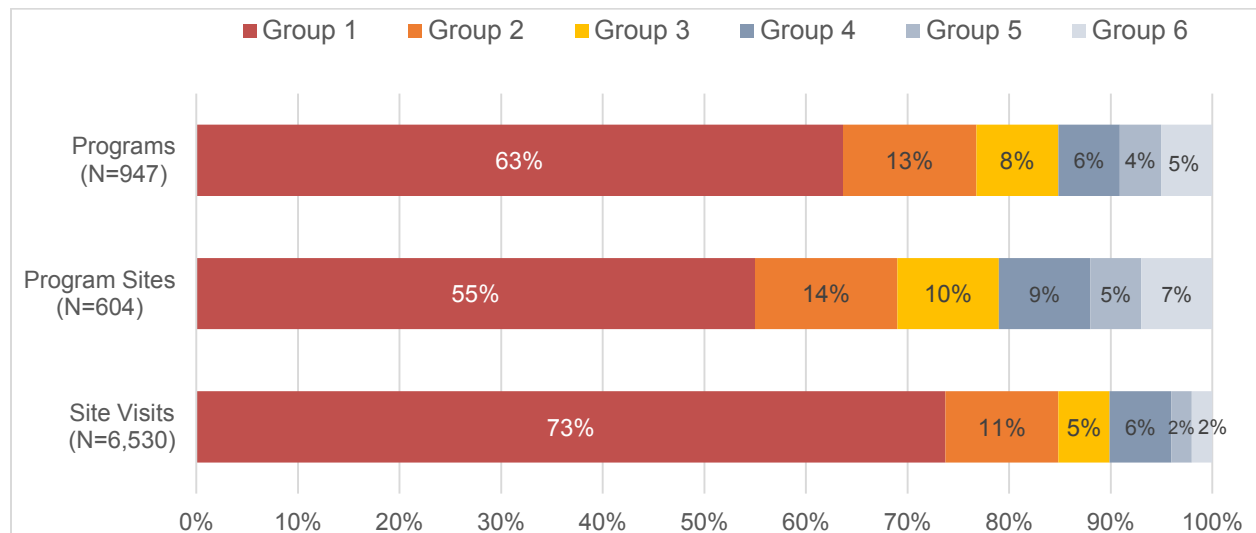
## **Areas of the State Where SNAP Target Audience Is Underserved or Has Not Had Access to SNAP-Ed Previously**

### **SNAP-Ed Reach in Connecticut**

**Community Settings.** During FFY 2017 - FFY2018 Q3, Connecticut SNAP-Ed efforts spanned the state, reaching SNAP-Ed eligible population at more than 600 community sites located in more than 70 of the state's 169 towns. Programs were delivered at different types of community sites with the intent of improving the health of the SNAP-Ed target audience during all stages of life, especially childhood. More than half of program locations were in schools, early care settings, or before or after school programs. The ten most common types of sites were: early care settings (30%), schools (22%), emergency food programs (13%), housing, senior centers & congregate meal locations (8%), WIC offices & other social service locations (6%), faith-based locations (4%), farmers markets & food stores (4%), community & recreation centers (3%), libraries (3%), and before/after school programs (3%).

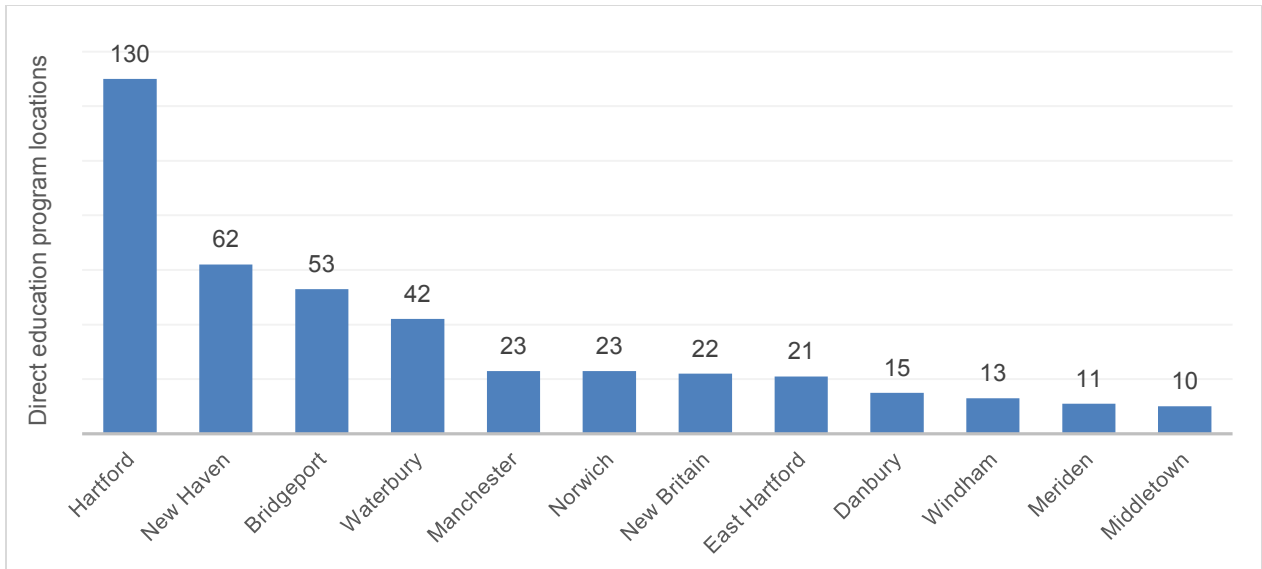
**Geographic Location.** Figure A-14 summarizes the distribution of program sites in the community, site visits, and total programs covered for each SNAP-Ed priority group during FFY2017-FFY2018 Q3. During this time period, direct education programs were implemented in each town identified as priority groups 1, 2, and 3. CT SNAP-Ed reach was greatest among towns in priority groups 1-3. More than half of the community sites and almost three-quarters of site visits occurred in priority group 1 towns.

**Figure A-14: Reach of Direct Education by CT SNAP-Ed Priority Groups, FFY 2017-FFY2018 Q3**



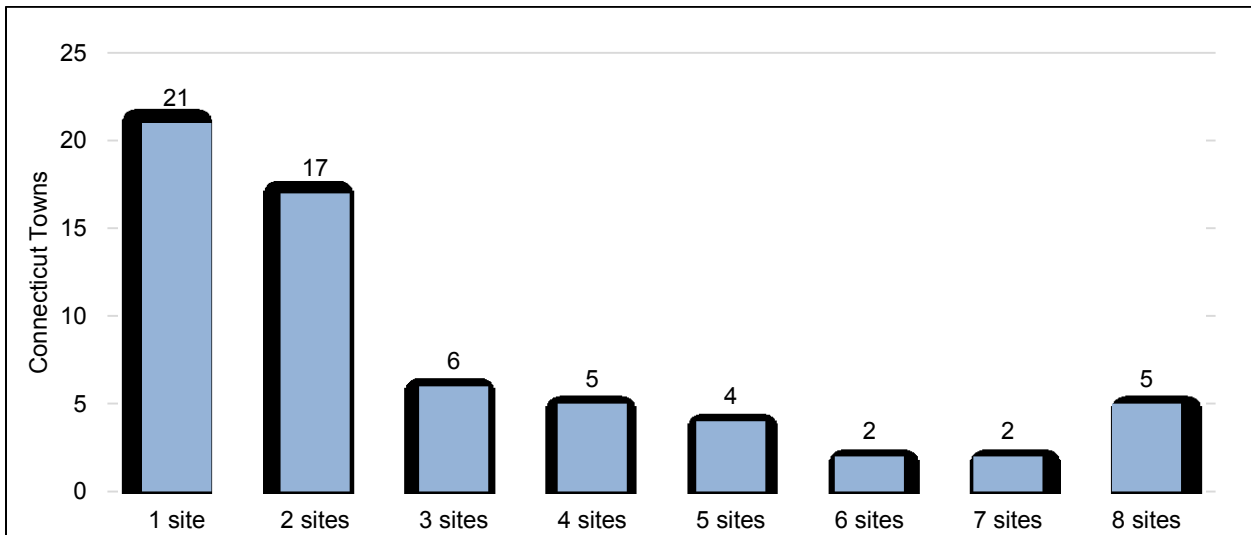
In twelve towns, CT SNAP-Ed delivered nutrition education in at least 10 locations (Figure A-15). These twelve towns were home to more than 70% of program sites. The four towns with the greatest number of program sites were Hartford (130 sites), New Haven (62 sites), Bridgeport (53 sites), and Waterbury (42 sites).

**Figure A-15: Towns with 10 or more SNAP-Ed delivery sites, FFY 2017-FFY2018 Q3**



Conversely, in more than half of the towns with SNAP-Ed programming there were just one or two program sites. SNAP-Ed programs were delivered at one site in 21 towns and two sites in 17 towns. Figure A-16 summarizes the number of program sites for the remaining 62 towns. In addition, table A-5 includes a list of towns by number of program sites for reference when designing outreach strategies.

**Figure A-16: Distribution of program sites among Connecticut Towns, FFY 2017-FFY2018 Q3**



**Table A-5: Towns with 8 or fewer program sites**

Sites in town	Towns
1	21 Andover, Ashford, Avon, Bolton, Brookfield, Burlington, Columbia, Glastonbury, Granby, Hebron, Milford, Monroe, Plainville, Plymouth, Simsbury, Stafford, Tolland, Trumbull, Willington, Windsor, Woodbridge
2	17 Branford, Bristol, Canton, Coventry, East Haven, East Windsor, Farmington, New Milford, Newtown, Old Saybrook, Plainfield, Rocky Hill, Salem, Seymour, South Windsor, Stonington, Stratford
3	6 Bloomfield, Colchester, Derby, Ellington, Naugatuck, Winchester
4	5 Ansonia, Clinton, Newington, Putnam, Wethersfield
5	4 Bethel, Griswold, Mansfield, West Haven
6	2 Enfield, Vernon
7	2 Hamden, Norwalk
8	5 Groton, New London, Stamford, Torrington, West Hartford

*Potentially underserved towns.* Further analyses were conducted to identify potentially underserved towns among the 13 towns from priority groups 1 and 2. Figure A-17 shows the total number of direct education sites and programs for the four priority group 1 towns with 35,000 or more SNAP participants. Hartford had more than twice as many sites and programs when compared to the other three towns. Although Hartford does have the most SNAP participants, the difference in SNAP-Ed delivery is disproportionate when compared to New Haven, Waterbury, and Bridgeport. For example, Hartford has about 25% more SNAP participants than New Haven but New Haven had roughly half as many sites and programs with SNAP-Ed. In addition, although the number of SNAP participants differs only marginally for New Haven, Bridgeport and Waterbury, New Haven had disproportionately more sites and programs than Bridgeport and Waterbury.

*Figure A-17: Differences in program delivery among priority group 1 towns with SNAP enrollment of more than 35,000 participants*

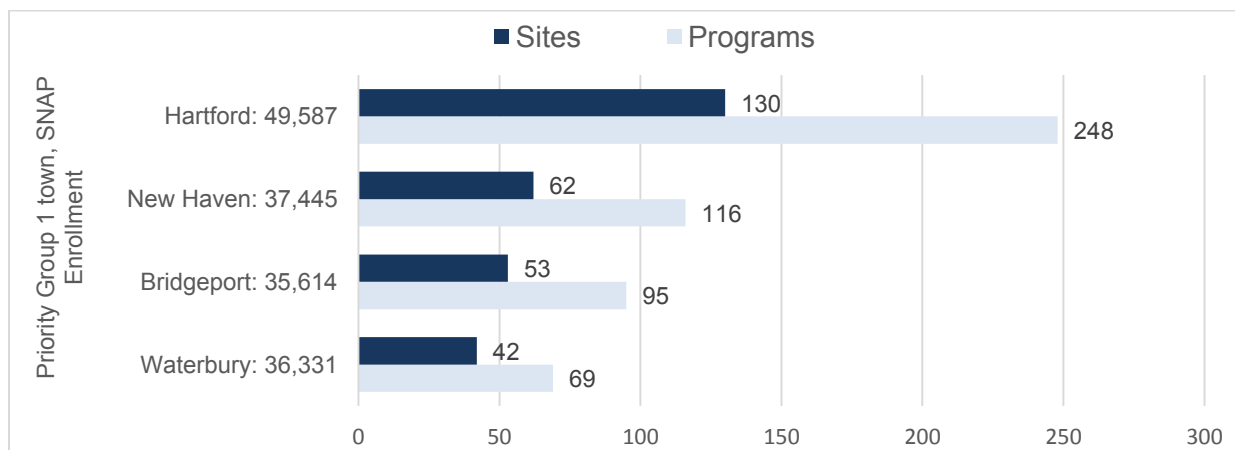




Table A-6 is intended as a tool to inform outreach strategy discussions and goal setting for towns in priority groups 1 and 2. New London, a priority 1 town, has approximately one-third the number of sites and 25-30% as many programs when compared to three towns from priority group 3: East Hartford, Norwich and Manchester.

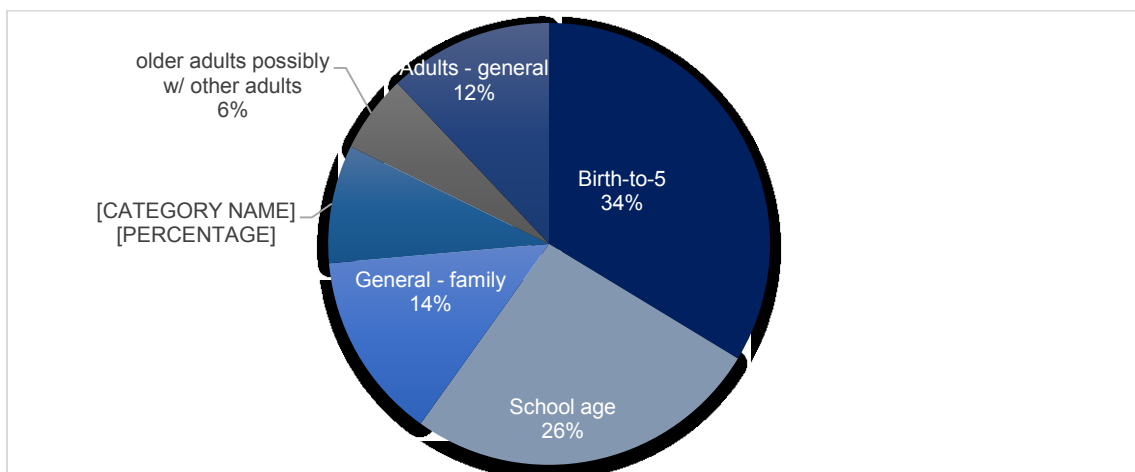
**Table A-6. Total direct education programming and potential to reach SNAP participants in 13 towns from SNAP-Ed priority groups 1 and 2**

Priority Group Towns	Program Sites	Education Programs	Number of SNAP Participants in Town*	% of town population enrolled in SNAP*
<b>Group 1</b>				
Hartford	130	248	49,587	40
New Haven	62	116	37,445	29
Bridgeport	53	95	35,614	24
Waterbury	42	69	36,331	34
New Britain	22	45	22,369	31
New London	8	9	7,169	27
Windham	13	18	6,554	27
<b>Group 2</b>				
East Hartford	21	34	10,872	22
Norwich	23	34	8,865	22
Manchester	23	31	8,762	15
Meriden	11	16	12,720	21
West Haven	5	6	8,139	15
Ansonia	4	4	3,096	17

\*SNAP participation data is from the January 2018 report.

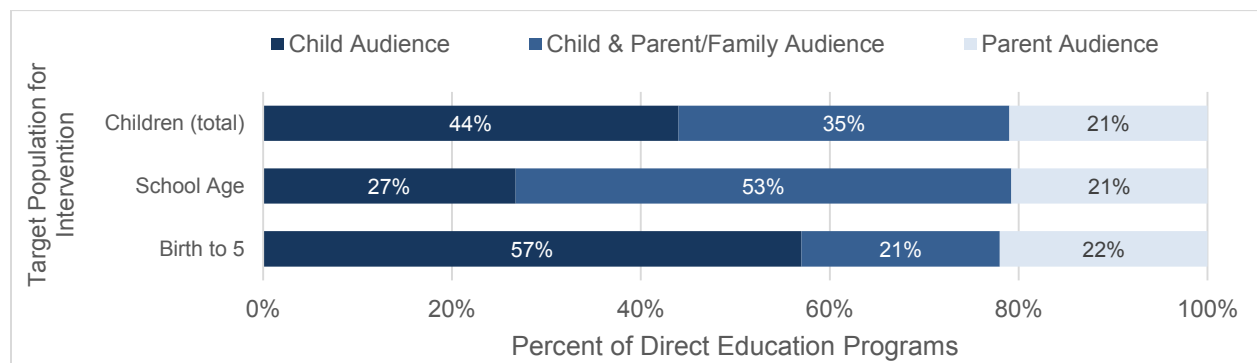
**Target population – age groups.** Connecticut SNAP-Ed implements direct nutrition education with the goal of improving the health and health-related behavior outcomes of target populations. Program data for FFY 2017-2018 Q3 suggests that 60% of programs focused on improving child health, 18% focused on adults, and 22% focused on sharing nutrition education messages with adults and families in food pantries, farmers markets, health fairs, libraries and other community settings.

**Figure A-18: Programs delivered to improve the health of target age groups (n=947)**



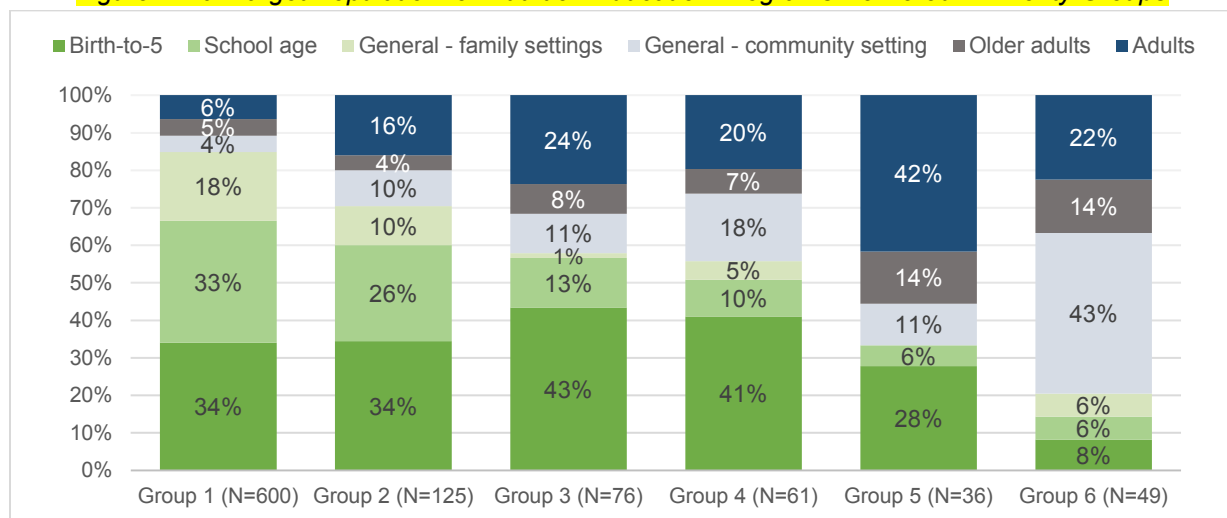
Direct education programs designed to improve outcomes for children were most commonly delivered to children (Figure A-19). Of the programs delivered, 44% had a child audience, 35% involved a child audience and parents, children or families, and 21% had a parent only audience. Of note, almost 60% of the programs designed to improve the health of children in the birth-to-5 age group were delivered to preschool age children whereas more than half of programs focused on the health of school age children were delivered to children and engaged parents or families in some way. Interestingly, for both age groups, fewer than 23% of the direct education programs had a parent audience.

Figure A-19: Program Audience for Direct Education Programs Designed to Improve Child Health (n=947)



More than 60% of programs in both priority group 1 and priority group 2 towns and more than half of programs in priority groups 3 (56%) and 4 (51%) focused on improving the health of children (Figure A-20). The most common intervention population for priority group 5 programs was adults and/or older adults (56%) while the most common population for priority group 6 was adults or families in community settings (43%).

Figure A-20: Target Population for Nutrition Education Programs Delivered in Priority Groups

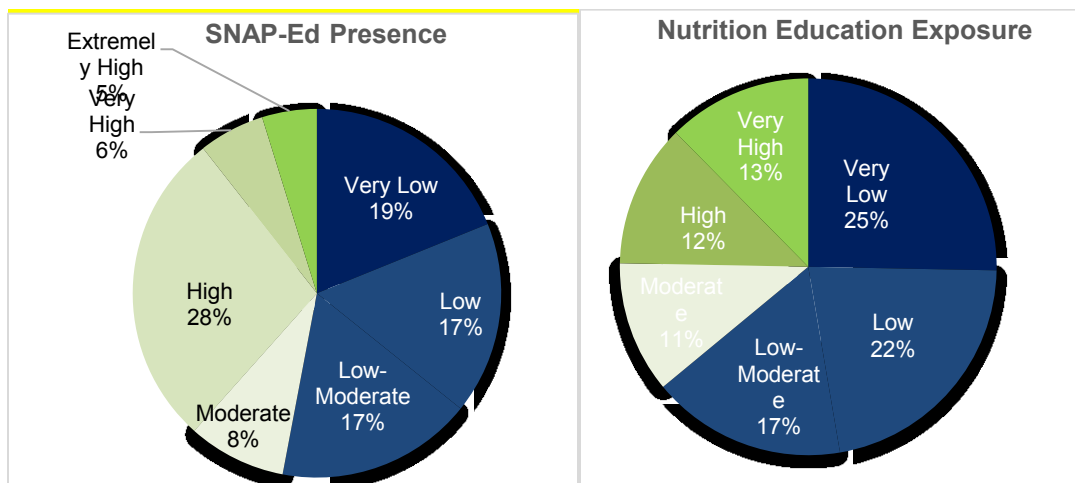


**SNAP-Ed Intensity at Program Sites.** The extent to which community sites have an ongoing SNAP-Ed presence and high exposure to SNAP-Ed programs was evaluated using program data for FFY2017-2018 Q3. The analysis reflects intensity at the site level on an annual basis. Criteria for rating the intensity of SNAP-Ed presence and nutrition education are listed in Table A-7. In this report, exposure refers to the length of the intervention(s) experienced by a participant, not the total number of hours CT SNAP-Ed delivers programming. This differs from the EARS approach

<b>Table A-7: Criteria for rating intensity of programming</b>		
Rating	Exposure (hours)	Presence (visits)
Very low	≤ 1	1-2 (one time events)
Low	2-3	2-3
Low-Moderate	4	4-5
Moderate	5-6	5-9
High	7-8	10-15
Very High	10 or more	≥ 16 visit program, or High frequency + lower frequency
Extremely High	n/a	≥ 2 high or very high frequency programs

In FFY2017-2018 Q3, CT SNAP-Ed had a high-to-extremely high presence in almost 40% of program sites and delivered high-to-very high intensity nutrition education programs in 25% of program sites (Figure A-21).

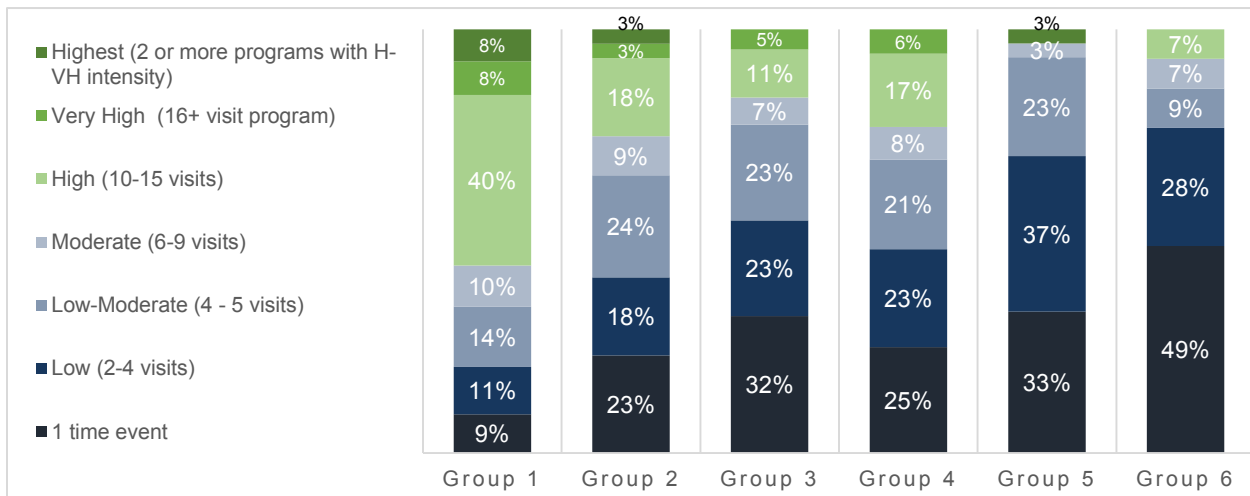
**Figure A-21: Intensity of Direct Education Presence & Exposure**



The frequency of visits to program sites and the duration of nutrition education interventions for each priority group is shown in Figure A-22 and Figure A-23, respectively. Connecticut SNAP-Ed has the highest overall presence at sites located in priority group 1. In priority group 1, more than half of the program sites had a high-to-extremely high SNAP-Ed presence. This compares to 24% for priority group 2, 23% for priority group 4, 16% for priority group 3 and 7% or fewer for priority groups 5 and 6.

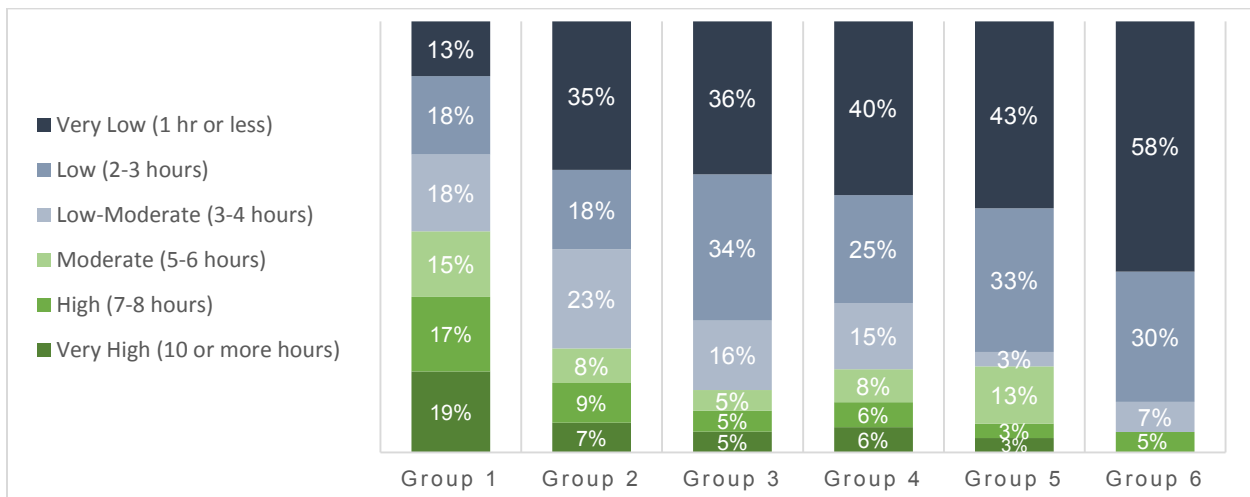
Approximately one-third of program sites in priority group 1 and 5 had a relatively low SNAP-Ed presence of 2-4 visits. For priority group 6, almost 50% of program sites had one-time events.

*Figure A-22: Intensity of Direct Education Presence at Sites: Frequency of Visits*



The intensity of direct education program exposure followed a similar pattern. For priority group 1, 36% of program sites had high-to-very high levels of direct education exposure with seven or more hours. This compares to 15% for priority group 2, 12% for priority group 4, 10% for priority group 3, and 6% or fewer for priority groups 5 and 6. With the exception of priority group 1 (13%), more than one-third of program sites in each of the other priority groups had very low exposure of 1 hour or less. Direct education exposure levels were three hours or less in 65% or more of the program sites in priority groups 3-6.

*Figure A-23: Intensity of Direct Education Exposure at Sites*



## Implications of Your Needs Assessment and How These Findings Were Applied to This Current Year's SNAP-Ed Plan

### Needs Assessment Implications

The four implications of this year's needs assessment findings suggest that Connecticut may benefit from focusing on the following four areas: 1) SNAP-Ed reach in the 13 towns from priority groups 1 and 2; 2) SNAP-Ed presence and direct education exposure strategy for the 13 towns in priority groups 1 and 2; 3) Parents as the target audience for direct education programs designed to improve child health; and 4) increase formalized collaboration with non-SNAP obesity prevention activities. For each of these areas, additional comments are a description is provided below.

- 1) ***SNAP-Ed reach in the 13 towns from priority groups 1 and 2.*** The amount of programming in the 13 towns from priority group 1 and 2 is disproportionate to the potential opportunities to reach the SNAP-Ed eligible population. For example, Hartford has far more programs than in New Haven, Bridgeport and Waterbury whereas New London has fewer programs than East Hartford, Norwich and Manchester. Tables A-4 and A-5 were created as a tool to help develop outreach goals for each town in these priority groups.
- 2) ***SNAP-Ed presence and direct education exposure strategy for the 13 towns in priority groups 1 and 2.*** Recent data shows that the Connecticut SNAP-Ed approach had a high-to-extremely high presence in almost 40% of program sites and implemented programs with high-to-very high direct education exposure at 25% of sites. However, these indicators of reaching sites with high impact programming were generally much lower. Going forward it may be helpful to set town-level goals for SNAP-Ed presence and direct education exposure at sites.
- 3) ***Parents as the target audience for direct education programs designed to improve child health.*** Based on Connecticut data, almost 40% of SNAP participants were children and more than one-third of the SNAP households had children. As such, Connecticut SNAP-Ed allocated significant resources to improve outcomes for children. However, Connecticut efforts to prevent obesity during childhood may benefit from a stronger emphasis of direct education for parents/caregivers and expecting mothers, rather than at the child level. Program data from this review shows that for the birth-to-five population, almost 60% of the direct education programs were delivered to the preschool age child whereas 21% of programs were designed for parents.

- 4) ***Increase formalized collaboration with non-SNAP obesity prevention activities.*** Throughout Connecticut, a substantial number of obesity prevention activities are happening at the state, city, neighborhood and school level. This activity creates an opportunity for enhancing and formalizing collaboration, especially by mapping out explicit ways to build on existing efforts such as the Coordinated School Health Program, city-level or neighborhood initiatives, and school-based or early care based wellness initiatives. It may also be beneficial to designate high intensity programming zones focused around specific school(s), cities, neighborhoods, or child care centers. Existing resources and intervention profiles could then be established, and the interface between non-SNAP efforts and complementary SNAP-Ed activities could be defined.

Project 1 - Department of Public Health Preschool, Family & Community

## Template 2: SNAP-Ed State Goals, Objectives, Projects, Campaigns, Evaluation, and Collaboration

### Reporting Progress on State-Level Goals and Objectives

The Department of Public Health (DPH) has developed a systematic method for collecting, analyzing, and using information collected from SNAP-Ed program participants to determine program effectiveness and efficiency. The Preschool, Families, and Community Project will involve process and outcome evaluation of the main nutrition activities. For policy, systems, and environmental change (PSE) activities, post-training surveys will be handed to Early Childhood Education (ECE) teachers/staff to ascertain overall satisfaction with the training and to assess their willingness and readiness to affect PSEs in their ECEs. For Nutrition Classroom Lessons through the train-the-trainer model of educating preschoolers, surveys will be mailed to teachers to determine reach (number of preschool children), intensity (number of minutes) and coverage (geographical location) of the initiative. For Eating Smart • Being Active (ESBA) nutrition education workshops and nutrition education sessions, participants will complete demographic cards and pre-test, post-test, and six-week follow-up surveys. The demographic cards are for Education Administration Reporting System (EARS) reporting purposes. The pre-test and post-test surveys are to determine participant knowledge gained and attitude toward behavior change. The six-week follow-up surveys are to determine any behavioral changes as the result of receiving nutrition education.

### Description of projects/interventions:

#### ***Project/Intervention Title:***

Connecticut Department of Public Health – Preschool, Families, and Community Project

#### ***Related State Objective(s):***

The Connecticut Department of Public Health (DPH) project supports the Connecticut SNAP-Ed State Plan for Fiscal Year (FY) 2020: Goal 1: Objectives 1.1-1.9; Goal 2: Objectives 2.1-2.2; and Goal 3: Objectives 3.1-3.5

#### ***Audience:***

There are two project components to the Connecticut Department of Public Health – Preschool, Families, and Community Project: 1) Preschool Children and their Families, and 2) Adults/Families.

### **Component 1: Preschool Children and their Families**



The target audience is SNAP participants, low-income individuals eligible to receive SNAP benefits, other means-tested federal assistance programs, as well as individuals residing in communities with a significant low-income population (preschool children ages 3-5 and families).

The Preschool Children and their Families project component will reach SNAP households through collaboration with Head Start (HS), School Readiness (SR), Early Childhood Education (ECE), and Summer Meals programs. Connecticut serves over 10,000 HS/SR preschool children and families. Programs are divided into operational priority clusters throughout the state based on the number of HS/SR programs and census tract population with median household income  $\leq 185\%$  of the federal poverty level.

- HS programs provide services to families that are  $\leq 185\%$  of the federal poverty level.
- SR programs are state-funded preschool education programs. Approximately 75% of SR households are  $\leq 185\%$  of the federal poverty level. SR programs will be identified and targeted based the following criteria: location within a priority school district,  $>50\%$  of children receive free and reduced-cost meals through the Child and Adult Care Food Program, and  $>50\%$  of the census tract population is  $\leq 185\%$  of the federal poverty level.

The target audience for this project component resides in Connecticut's major cities of Bridgeport, Hartford, New Haven and Waterbury as well as Bristol, Danbury, East Hartford, Meriden, New Britain, Norwalk, Norwich, Stamford, West Haven, Torrington, and Windham. It is proposed that nutrition education activities be conducted in these areas; however, the DPH program will not duplicate other SNAP-Ed services offered in Connecticut.

### **Component 2: Adults/Families**

The target audience is SNAP participants, low-income individuals eligible to receive SNAP benefits, other means-tested federal assistance programs, as well as individuals residing in communities with a significant low-income population (18 years of age and older including adults 60+).

This project component will reach the target audience in the following locations:

- The Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) Offices – At least one WIC main office or satellite in each of the twelve local WIC programs will be targeted for SNAP-Ed services. The DPH contracts with 12 WIC main offices located in Bridgeport, Bristol, Danbury, East Hartford, Hartford, Meriden, New Haven, Stamford, New

London, Torrington, Waterbury, and Windham; and the 33 satellites throughout the state. SNAP-Ed participation by WIC offices and/or WIC satellites is encouraged by the DPH state-level WIC Program. However, participation is voluntary and based on each agency's needs.

- Community Health Centers (CHC) – CHC locations targeted will include Bridgeport, Hartford, Meriden, Middletown, New Britain, and New Haven. Additional CHCs will be targeted as determined by community needs and/or future partnership development.
- Community Partner Locations – Additional sites targeted with a high percentage of SNAP clientele will include, but will not be limited to, the following: Department of Social Services' (DSS)/SNAP Offices in Norwich and Willimantic, Community Action Agencies, Emergency Food Assistance Sites (including mobile food pantries), Commodity Supplemental Food Program (CSFP) sites, and Farmers' Markets. The DPH continues to work with our current community partners to expand our network and geographic penetration to promote consistent messaging across the community.

Connecticut serves 408,448 SNAP participants<sup>27</sup> which includes about 47,800 WIC participants.<sup>28</sup> The target audience for this project component is focused on low-income individuals eligible to receive SNAP benefits and other means-tested federal assistance programs, as well as individuals residing in communities with a significant low-income population. The communities include Connecticut's major cities (i.e., Bridgeport, Hartford, New Haven, and Waterbury), as well as Bristol, Danbury, East Hartford, Meriden, New Britain, Norwalk, Norwich, Stamford, West Haven, Torrington, and Windham. It is proposed that nutrition education activities be conducted in these areas; however, the DPH program will not duplicate other SNAP-Ed Services offered in Connecticut.

### ***Food and Activity Environments:***

The DPH Preschool, Families, and Community Project will provide nutrition education and obesity **prevention activities at the individual and community level through evidence-based strategies and interventions**. The project will provide nutrition education sessions and workshops that will increase participants' awareness and

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<sup>27</sup> Supplemental Nutrition Assistance Program: Average Monthly Participation (Person) Data as of June 8, 2018 <https://fns-prod.azureedge.net/sites/default/files/pd/29SNAPcurrPP.pdf> Accessed on **June 19, 2019**.

<sup>28</sup> USDA Food and Nutrition Service WIC program Data, WIC Program: Total Participation Data as of June 8, 2018 <https://fns-prod.azureedge.net/sites/default/files/pd/26wifypart.pdf> Accessed on **June 19, 2019**.

knowledge of the 2015-2020 Dietary Guidelines for Americans. Participants will be encouraged to:

- increase whole fruit consumption by one-half portion
- increase vegetables by one-half portion
- make half of their grains whole
- move to low-fat or fat-free milk and milk products
- increase physical activity and reduce sedentary time
- maintain appropriate calorie balance during each stage of life

### ***Project Description:***

#### **Component 1: Preschool Children and their Families**

This project component targets SNAP participants, low-income individuals eligible to receive SNAP benefits, and other means-tested federal assistance programs, as well as individuals residing in communities with a significant low-income population (preschool children ages 3-5 and families). This project component uses a three-pronged delivery method to synergistically reach the target audience and to achieve SNAP-Ed goals.

**First: Train-the-Trainer.** Preschool administrators and teachers serving as nutrition education multipliers will be trained to teach nutrition education to preschool children using the Coordinated Approach to Child Health (CATCH) program, CATCH Early Childhood (CEC).<sup>29</sup> DPH SNAP-Ed staff will continuously work with preschool administrators and teachers throughout the CEC implementation period to ensure program fidelity. Educators will be provided a CEC Kit which consists of the “*It’s Fun to Be Healthy*” Teacher’s Manual, hand puppets, a CEC Physical Activity Box, and the CEC Coordination Guide. The manual, hand puppets, and physical activity box provide resources and tools needed to conduct nutrition education in the classroom and to support school-wide environmental change activities. Further information regarding CEC will be described in the policy, systems, and environmental change section within the Project Description.

DPH SNAP-Ed staff will provide ongoing technical assistance and support including an onsite visit to observe and coach staff in leading CATCH activities, work through any barriers, and set realistic goals for implementation at each site throughout the school year. Program implementation data will be collected periodically using existing school-based tools created by CATCH which have been adapted for the preschool setting. Data collection and reporting will seek to measure the number of CEC lessons taught, resources utilized in classroom, parent handouts and at home activities distributed to

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<sup>29</sup> CATCH Early Childhood (CEC). 2018. SNAP-Ed Toolkit. Available at: <https://snapedtoolkit.org/>  
Accessed 19 Jun. 2019.

complement in-classroom lessons, and implementation of environmental support activities as outlined in the CEC Coordination Toolkit. DPH SNAP-Ed staff will work with other SNAP-Ed implementing agencies nationwide to identify adapted tools specific to preschool settings that are validated and reliable to ensure quality data collection.

**Second: Nutrition Classroom Lessons.** Preschool teachers will implement the ECE nutrition education curriculum in their classrooms. The nutrition and gardening-based lessons encourage healthy eating behaviors and the activity cards with music promote physical activity. A music CD will be used to keep the class motivated, moving, and having fun. As described above, DPH SNAP-Ed staff will provide ongoing support to the administrators and teachers throughout the school year to ensure successful implementation of the lessons.

**Third: Nutrition Education Sessions and Workshops.** This activity uses evidence-based nutrition education and behavior change strategies for the parents of preschool children with the goal of improving overall nutrition and increasing physical activity of families. Parents are targeted as they have the most influence on food choices and are able to enforce healthy messages within their families. Lifestyle changes are promoted through nutrition education sessions, group workshops, and cooking demonstrations that include food tasting and distribution of healthy recipes. USDA's Food and Nutrition Services (FNS) has found that effective health education interventions require both intensity and duration. Thus, the program uses various modes of delivery and tailors lesson plans to individual population needs (ethnic, cultural, language and socio - economic status). The program curriculum that will be utilized is based on the USDA's 'MyPlate' which is based on the 2015-2020 Dietary Guidelines<sup>30</sup> for Americans, the 2008 Physical Activity Guidelines for America,<sup>31</sup> and the 2012 FNS Core Nutrition Messages.<sup>32</sup> Each topic has a key message linked to one or more of the 2015-2020 USDA Dietary Guidelines for Americans key recommendations. The workshop and nutrition education session content will be based on *Eating Smart • Being Active*, a curriculum developed at Colorado State University and University of California at Davis<sup>33</sup> for low income adults with young children.

The DPH collaborates with the University of Saint Joseph (USJ) and Connecticut's HS, SR, ECE, and Summer Meals programs to conduct the above-mentioned nutrition

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<sup>30</sup> 2015-2020 Dietary Guidelines for Americans. Available at <http://www.cnpp.usda.gov/dietary-guidelines> Accessed June 19, 2019.

<sup>31</sup> 2008 Physical Activity Guidelines for Americans. Available at <http://www.health.gov/paguidelines/guidelines/summary.aspx> Accessed June 19, 2019.

<sup>32</sup> FNS core messages. Available at <https://www.fns.usda.gov/core-nutrition/background> Accessed June 19, 2019.

<sup>33</sup> Eating Smart Being Active. Available at: <http://eatingsmartbeingactive.colostate.edu/wp-content/uploads/2016/11/program-implementers-guide-2016.pdf> Accessed June 19, 2019.

activities. The targeted numbers of participants/contacts to be reached from these activities are illustrated in the table below:

Main Nutrition Activity	Total # of participants/contacts
<p>1. <b>Train-the-Trainer: Three-day Coordinated Approach to Child Health (CATCH), Early Childhood (CEC) training conducted by a CATCH trained staff for Early Childhood Education administrators and teachers. SNAP-Ed staff will provide ongoing technical assistance and support to Early Childhood Education sites trained on CEC programs.</b></p>	<p>30 preschools for 60 preschool teachers/staff</p>
<p>2. <b>Teach 9 nutrition-based and 10 gardening-based Nutrition Classroom Lessons, which are 20-minutes each in length, to SNAP eligible preschool children using the CEC nutrition education curriculum. The CEC nutrition education curriculum is designed to encourage healthy eating behaviors and includes physical activity.</b></p>	<p>1,600 estimated numbers of unique participants</p>
<p>3. Teach 30-minute <i>Eating Smart • Being Active</i> nutrition education sessions and workshops to SNAP eligible parents at HS, SR, and Summer Meals programs at location specified in target audience. Sessions will be conducted in English and Spanish based on population needs as described above.</p>	<p>128 sessions/workshops for <b>960 estimated numbers of unique participants with 1,280 contacts</b></p>
<p>The following supplemental nutrition activities will be conducted to complement the <i>Eating Smart • Being Active</i> nutrition education sessions and workshops.</p>	
<p>As part of the <i>Eating Smart • Being Active</i> nutrition education sessions and workshops, supplemental nutrition education materials are given to participants during direct education to share and enforce healthy messages within their families. The supplemental nutrition education materials in both English and Spanish. They will be used to encourage fruit and vegetable consumption, implementation of the dietary guidelines, and to share FNS Core Nutrition Messages. The recipes and the nutrition education material support the goals and key objectives of the <i>Eating Smart • Being Active</i> lessons. Recipes are</p>	<p>13,500 reach</p>

from various sources such as <i>Eating Smart • Being Active</i> , <i>MyPlate for My Family</i> (MPFMF) and <i>SpendSmart</i> extension from Iowa State University <a href="https://spendsmart.extension.iastate.edu/recipe/">https://spendsmart.extension.iastate.edu/recipe/</a> .	
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While the reach of this project component will extend to all target populations and areas described in the Audience section above, a greater focus will be placed on the priority communities in Bridgeport, Hartford, New Haven and Waterbury as well as Bristol, Danbury, East Hartford, Meriden, New Britain, Norwalk, Norwich, Stamford, West Haven, Torrington, and Windham. The priority communities are identified by a Planning Tool using geographic information system (GIS) mapping to identify Connecticut communities with low-income neighborhoods, neighborhoods with low access to healthy food retailers, and small area estimates for childhood obesity. **The DPH will focus its efforts in New Haven, Hartford and Bridgeport for Fiscal Year 2020.** The priority locations and their timing will reinforce the initiatives proposed in the Policy, Systems, and Environmental Changes Section below.

### **Component 2: Adults/Families**

This project component targets SNAP participants, low-income individuals eligible to receive SNAP benefits, other means-tested federal assistance programs, as well as individuals residing in communities with a significant low-income population (18 years of age and older including adults 60+).

The DPH and USJ SNAP-Ed Nutrition Education Team (NET) are composed of agency staff, faculty, registered dietitians, educators and students. The DPH SNAP-Ed NET provides multi-sectoral nutrition education in a variety of community settings that are frequented by SNAP eligible adults. The project component uses evidence-based education and behavior change strategies to improve overall nutrition and physical activity, as well as to achieve positive obesity prevention and health promotion outcomes for the SNAP eligible adult population. Education provided promotes lifestyle changes through nutrition education sessions, group workshops, and cooking demonstrations that include food tastings and the distribution of healthy recipes. FNS has found that effective health education interventions require both intensity and duration. The program curriculum that will be utilized is based on the USDA's 'MyPlate' which is based on the 2015-2020 Dietary Guidelines<sup>34</sup> for Americans, the 2008 Physical Activity Guidelines for America,<sup>35</sup> and the 2012 FNS Core Nutrition Messages.<sup>36</sup> The program uses various modes of delivery and tailors lesson plans to individual population

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<sup>34</sup> 2015-2020 Dietary Guidelines for Americans.

<sup>35</sup> 2008 Physical Activity Guidelines for Americans.

<sup>36</sup> FNS core messages.

needs (ethnic, cultural, language and social economic status). Each topic has a key message linked to one or more of the 2015-2020 USDA Dietary Guidelines for Americans key recommendations. The workshop and nutrition education sessions content will be based on *Eating Smart • Being Active*, a curriculum developed at Colorado State University and University of California at Davis<sup>37</sup> for low income adults and families. The existing *Eating Smart • Being Active* curriculum will be implemented in **Fiscal Year 2020**. The program curriculum has eight different topics that will be used to teach nutrition education workshops and/or nutrition education sessions for adults and/or parents of preschool children. The topics are Get Moving, Plan Shop Save, Fruits and Veggies Half Your Plate, Make Half Your Grains Whole, Build Strong Bones, Go Lean with Protein, Make a Change, and Celebrate! Eat Smart and Be Active. All lesson content is based on the *Eating Smart • Being Active* curriculum, and handouts from the curriculum are also given to the participants for reinforcing nutrition messages learned. In addition, handouts from the USDA FNS *MyPlate for My Family* (MPFMF) curriculum<sup>38</sup> will be incorporated as part of the nutrition education reinforcement for this project component.

A health coaching initiative developed by the Michigan Fitness Foundation<sup>39</sup> will be employed by the educators in all settings (i.e., workshops and nutrition education sessions, etc.). Health coaching skills will be incorporated into the training of all nutrition educators. The individualized health coaching will motivate SNAP-Ed participants to maximize behavior changes. SNAP-Ed clients are invited to participate in the health coaching initiative during direct education and through our partner network. SNAP-Ed adult participants that participated in the existing *Eating Smart • Being Active* Nutrition Education Sessions and Workshops in either project component are eligible to participate in the health coaching. Clients participate in six weekly telephonic health coaching sessions that last between 20 and 30 minutes.<sup>40,41,42,43,44</sup> Key messages

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<sup>37</sup> Eating Smart Being Active.

<sup>38</sup> MyPlate for My Family. Available at: <https://snaped.fns.usda.gov/nutrition-education/fns-curricula/myplate-my-family> Accessed June 19, 2019.

<sup>39</sup> Coaching for Behavior Change Preliminary Evaluation Results from Year 1 (FY 2013). Available at: <http://www.leadershipthatworks.com/DocumentFiles/547.pdf>. Accessed June 20, 2019

<sup>40</sup> Olsen JM, Nesbitt BJ. Health coaching to improve healthy lifestyle behaviors: An integrative review. *Am J Health Promot.* 2010;25(1):e1-e12.

<sup>41</sup> Moore M, Tschannen-Moran B. *Coaching Psychology Manual*. Philadelphia, PA: Lippincott Williams and Wilkins; 2009: 132-147

<sup>42</sup> Arloski M. *Wellness Coaching for Lasting Lifestyle Changes*. Duluth, MO: Whole Person Associates, Inc 2009: 73-84, 156.

<sup>43</sup> Wolever RQ, Simmons LA, Sforzo GA, Dill D, Kaye M, Bechard EM, Southard ME, Kennedy M, Vosloo J, Yang N. A systematic review of the literature on health and wellness coaching: defining a key behavioral intervention in healthcare. *Glob Adv Health Med.* 2013;2(4):38-57.

<sup>44</sup> Healthcare Intelligence Network. *Guide to Health Coaching*. Sea Girt, New Jersey: 2016.

concentrate on healthy eating and physical activity as stated in the 2015 USDA Dietary Guidelines for Americans<sup>45</sup> and the 2008 Physical Activity Guidelines for Americans.<sup>46</sup>

Main Nutrition Activity	Total # of participants/contacts
<p>1. Teach 45-60 minute <i>Eating Smart • Being Active</i> nutrition education workshops (one series consists of four workshops) which incorporate a physical activity and a food demonstration component (as allowed by site/local regulations) to SNAP eligible adults. The nutrition education workshops employ a group discussion approach to engage participants in in-depth discussions of each nutrition education topic. The workshops will be conducted in English and Spanish at WIC offices, CHCs, and other Community Partner locations. Age-appropriate materials and foods will be provided. Recipes that specifically incorporate food provided by WIC and which encompass FNS core messages will be provided to all attendees of SNAP-Ed activities.</p>	<p>60 workshops for 225 estimated numbers of unique participant with 300 contacts</p>
<p>2. Teach 20-minute <i>Eating Smart • Being Active</i> nutrition education sessions (one series consists of four sessions) including food demonstrations (as allowed by site/local regulations) to SNAP eligible adults at partner sites such as WIC offices, CHCs, Community Action Agencies, Emergency Food Assistance Sites (including mobile food pantries), Commodity Supplemental Food Program, and Farmers' Markets.</p>	<p>168 sessions for 1,260 estimated numbers of unique participant with 1,680 contacts</p>
<p>3. Deliver individualized health coaching by telephone for SNAP-Ed participants. Individual sessions provide the intensity and duration needed for those clients who are motivated to maximize behavior changes. A session consists of 30-minutes telephonic individualized health coaching. Sessions will be conducted weekly for six weeks (six sessions total) to work on achieving individual goals set for each</p>	<p>45 participants with 270 contacts</p>

<sup>45</sup> 2015 USDA Dietary Guidelines for Americans.

<sup>46</sup> 2008 Physical Activity Guidelines for Americans.



participant.	
The following supplemental nutrition activities will be conducted to complement the <i>Eating Smart • Being Active</i> nutrition education sessions and workshops.	
As part of the <i>Eating Smart • Being Active</i> nutrition education sessions and workshops, supplemental nutrition education materials are given to participants during direct education to share and enforce healthy messages within their families. The supplemental nutrition education materials include healthy recipes and nutrition education materials in both English and Spanish. They will be used to encourage fruit and vegetable consumption, implementation of the dietary guidelines, and to share FNS Core Nutrition Messages. The recipes and the nutrition education material support the goals and key objectives of the <i>Eating Smart • Being Active</i> lessons. Recipes are from various sources such as <i>Eating Smart • Being Active</i> , <i>MyPlate for My Family</i> (MPFMF) and <i>SpendSmart</i> from Iowa State University.	21,000 reach

The DPH SNAP-Ed NET will expand the multi-sectoral nutrition education provided in a variety of community settings to SNAP eligible adults. The DPH SNAP-Ed NET will continue collaborations with organizations such as the Connecticut Food Policy Council and local food policy councils, End Hunger Connecticut!, Food Share, the Connecticut Food Bank and local food banks/pantries, Preschool Health Advisory Committees, the Connecticut Office of Early Childhood, the UConn Rudd Center for Food Policy and Obesity, the Connecticut State Department of Education, the New England Head Start Training and Technical Assistance Network, Child Health and Development Institute, local health departments, YMCAs, Boys and Girls Clubs, and other relevant community organizations and agencies. These collaborations will increase and/or expand opportunities to promote awareness, provide nutrition education, and encourage sustainable environmental change strategies. This will also be accomplished through the DPH SNAP-Ed NET’s active involvement on various community-based boards, committees, and councils.

The DPH – Preschool, Families, and Community Project incorporates key messages consistent with Connecticut’s State SNAP-Ed Plan, the 2015-2020 Dietary Guidelines for Americans, 2012 FNS messages, 2008 Physical Activity Guidelines, and *MyPlate* recommendations. The general purpose is to develop healthy eating habits in preschool

children: set a good example, offer a variety of foods, start with small portions, help them know when they've had enough, follow a meal and snack schedule, make mealtime a family time, cope with a picky eater, help them try new foods, and make food fun.

*Key Messages for Eating Smart • Being Active:*

- Make half your plate fruits and vegetables
- Switch to nonfat or 1% dairy (adults, children 2 or older)
- Make at least half your grains whole
- Vary your protein to include lean protein sources
- Reduce sodium intake
- Think your drink (choose water instead of sugary drinks)
- Eat the right amount of calories for you (enjoy your food, but eat less and avoid oversized portions)
- Be physically active at least 60 minutes most days of the week for children and at least 30 minutes most days of the week for adults
- Practice food safety
- Eat healthy on a limited budget

**Policy, Systems, and Environmental Changes**

The project's policy, systems, and environmental change (PSE) strategies are supported through the DPH SNAP-Ed staff's collaborations with the staff and nutrition students of USJ and community partners. This team works to improve the nutrition and physical activity levels of individuals, children, adults and families by coordinating PSE interventions with community-based organizations that focus on childhood obesity reduction and improving nutrition and physical activity.

The DPH will support expansion of nutrition-related policies to organizational settings. It has been found that providing examples of PSE strategies and resources can help influence organizations to change their policies to incorporate healthy eating and physical activity into their client's lives. This effectively changes the environment of these organizations. Examples include: food policy councils, End Hunger Connecticut!, Food Share Hunger Action Teams, Connecticut Food Bank, Preschool Health Advisory Committees, and other related community partners. Collaboration with these agencies involves shared communication and coordination of programming to support efforts and influence policy that promotes healthy eating and physical activity.

For **FY 2020**, DPH will be conducting three PSE initiatives: 1) Coordinated Approach to Child Health Early Childhood (CEC), 2) Nutrition and Physical Activity Self-Assessment

for Child Care (**Go NAPSACC**), and 3) Breastfeeding Friendly Child Care Recognition Program. The details of each initiative is described below.

### Coordinated Approach to Child Health Early Childhood (CEC)

Modeled after the nationally recognized Coordinated Approach to Child Health (CATCH) Program (grades K-12), CATCH Early Childhood (CEC) is an obesity prevention intervention designed to increase physical activity and promote healthy eating in children ages 3-5.<sup>47</sup> CEC is delivered over the course of a school year through direct nutrition education and PSE approaches at center-based Early Childhood Education (ECE) sites, providing children an environment where physical activity, health education, gardening and healthy eating behaviors are valued, demonstrated and taught.<sup>48</sup> ECE staff are given the information and tools they need to successfully implement CEC at their sites through hands-on training, supportive materials, and technical assistance. During **Fiscal Year 2019**, DPH SNAP-Ed sponsored a three-day CEC training conducted by a master trainer from CATCH. The CEC training included two days of Train-the-Trainer training for DPH SNAP-Ed staff and one day of CEC implementation training for DPH SNAP-Ed staff as well as the CEC teams from each of 15 ECE sites. For **Fiscal Year 2020**, DPH SNAP-Ed will implement CEC in 30 center-based ECE sites located within the priority towns and communities identified in the state's needs assessment. Each of the selected ECE sites will identify a two-person CEC team, consisting of one administrator and one lead or senior teacher, who will coordinate CEC implementation at their site. Each participating ECE site will be provided a CEC Kit which consists of the *"It's Fun to Be Healthy"* teacher's manual, hand puppets, a CEC physical activity box, and the CEC coordination guide. The manual, hand puppets, and physical activity box provide the following resources and tools needed to conduct nutrition education in the classroom and to support school-wide environmental change activities:

- nutrition-based and gardening-based classroom lessons to encourage healthy eating behaviors
- activity cards with music to promote physical activity
- parent tip sheets that provide a home-based coloring activity, additional nutrition and physical activity information, and recipe ideas for parents
- extension activities aimed at promoting repetition of nutrition messages

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<sup>47</sup> CATCH Early Childhood (CEC). 2018.

<sup>48</sup> Cheryl, P., Guy, P. and Deanna, H. 2018. Catch Early Childhood Coordination Guide. Making the Healthy Choice the Easy Choice. Available at: <https://digitalcatchprod.s3.amazonaws.com/uploads/attachment/production/file/642/catch-early-childhood-coordination-toolkit-1st-edition-nov-2016.pdf> Accessed **19 Jun. 2019**.

- curriculum connectors to extend lessons into other learning areas such as language, math, and science
- an adaptive learning component to meet the needs of children with physical or learning disabilities
- stretching exercises to allow children to cool-down and transition back to classroom learning
- a music CD that keeps the class motivated, moving, and having fun

The CEC Coordination Guide provides step-by-step guidance on integrating wellness efforts throughout the school and into the community to facilitate environmental changes. The guide is organized into six bimonthly themes (every other month) and outlines a variety of activities designed to engage all members of the school community, supplement the topics taught in the classroom, and deliver consistent messaging about healthy lifestyles.<sup>49</sup> Activities include posting a bulletin board using included signage; sending home parent tip sheets, recipes, and newsletters; hosting a family event; planning staff wellness activities; and more.

The focus of CEC is to make the healthy choice the easy choice. The following provides an overview of the CEC nutrition and physical activity standards that ECE sites are encouraged to reach to become a “CATCH MVP School.” Key messages support these overall standards.

A CATCH MVP School:<sup>50</sup>

- Creates schedules so students can get 30 or more minutes of structured moderate to vigorous physical activity during the school day.
- Supports and promotes the importance of physical activity through posted signage, ongoing messages to teachers and communication with parents.
- Encourages families to devote 30 minutes or more of daily physical activity at home.
- Encourages students to eat fruits and vegetables every day.
- Promotes the consumption and availability of healthy GO (low-calorie, least processed) foods.
- Restricts, or strictly limits, the availability and consumption of WHOA (high-calorie, low-nutrition) foods at school.
- Promotes the benefits of drinking water or fat-free milk instead of sweetened beverages.

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<sup>49</sup> Ibid.

<sup>50</sup> Ibid.

- Supports and promotes the importance of eating healthy through posted signs, ongoing messages to teachers and communication with parents. Practice healthy habits.
- Nurtures a belief that school staff should model healthy behaviors.
- Creates school policies that promote and raise standards about health and wellness.
- Encourages students and parents to reduce sedentary activity by limiting TV to no more than one hour per weekday and two hours a day on weekends.
- Urges students to eat a healthy breakfast every day and get nine to ten hours of sleep each night.

DPH SNAP-Ed will expand CEC implementation in **FY 2020** to increase the reach and impact of the intervention **by recruiting 30 ECE sites to participate**. DPH SNAP-Ed will be responsible for conducting the CEC implementation training and will offer **two separate training dates in FY 2020** to accommodate the expanded number of sites included in the intervention. CEC sites will be recruited from those that have participated in the Nutrition and Physical Activity Self-Assessment for Child Care (**Go NAPSACC**) intervention described later in an effort to facilitate a multi-faceted approach to obesity prevention.

Number of HS, SR, and ECE Sites	Number of Estimated Reach
30	1,800

**Go Nutrition and Physical Activity Self-Assessment for Child Care (Go NAPSACC)**

The Go NAPSACC program is a PSE intervention that targets ECE sites to ensure policies and practices help preschool children (0-5 years old) establish healthy habits for life. Go NAPSACC offers an evidence-based online platform that facilitates efficient delivery of the intervention, which consists of the following critical elements: 1) an organizational self-assessment, 2) goal setting and action planning, 3) resources and materials to put plans into action, 4) technical assistance and consultation, and 5) follow-up and reinforcement.<sup>51,52</sup> Best practices are grouped into seven modules: Breastfeeding & Infant Feeding, Child Nutrition, Farm to ECE, Oral Health, Infant &

<sup>51</sup> Center TRT Nutrition and Physical Activity Self-Assessment for Child Care (NAP SACC). UNC at Chapel Hill, Center for Health Promotion and Disease Prevention Division of Public Health, NC Department of Health and Human Services. 2014. Available at: [http://www.centertrt.org/content/docs/Intervention\\_Documents/Intervention\\_Templates/NAPSACC\\_Template\\_Updated\\_April\\_2014.pdf](http://www.centertrt.org/content/docs/Intervention_Documents/Intervention_Templates/NAPSACC_Template_Updated_April_2014.pdf) Accessed 19 Jun. 2019.

<sup>52</sup> Go Nutrition and Physical Activity Self-Assessment for Child Care (Go NAP SACC) 2016. SNAP-Ed Toolkit. Available at: <https://snapedtoolkit.org/> Accessed 19 Jun. 2019.

Child Physical Activity, Outdoor Play & Learning, and Screen Time. The online toolkit supports ECE sites in implementing Go NAPSACC best practices and provides DPH staff access to ECE sites' assessments, action plans, and reports to monitor implementation, identify technical assistance needs, and measure change.

Go NAPSACC is being launched statewide in Connecticut through funding from the Centers for Disease Control and Prevention State Physical Activity and Nutrition Program, Cooperative Agreement DP18-1807. The DPH SNAP-Ed is using the Go NAPSACC platform to ensure consistency with statewide initiatives and leverage funding to expand the reach and impact of DPH initiatives. Sites recruited to participate in Go NAPSACC through DPH SNAP-Ed will be provided technical assistance by DPH SNAP-Ed staff as described below

The DPH SNAP-Ed will implement Go NAPSACC in center-based ECE sites located within priority towns and communities as identified in the state's needs assessment. The Go NAPSACC implementation period is expected to range from 6 to 9 months in duration to complete one to two of the modules. Each participating ECE site will initially complete an organizational self-assessment, the central component of Go NAPSACC. The GO NAPSACC assessment tools measure policy, practices, and environments within each module to identify the site's strengths and limitations. Following the self-assessment, DPH SNAP-Ed staff will work with each ECE site to identify goals and develop an action plan for improving nutrition and physical activity practices based on limitations identified in the assessment.<sup>53</sup> As sites begin to implement their action plans, DPH SNAP-Ed staff will provide technical assistance as needed, which may include staff training.

DPH SNAP-Ed staff will promote problem solving and assist staff with making organizational-level changes through the provision of on-site targeted technical assistance. In addition, ECE sites will receive support identifying community resources such as connections to SNAP-Ed parent workshops and the breastfeeding-friendly child care training and toolkit described in other parts of the plan. Each ECE site will receive a minimum of five hours in-person technical assistance and follow-up support remotely as needed. At the end of implementation period, participating ECE sites will complete the assessment tools again to evaluate progress, revise and repeat the process, and identify future implementation needs.

The Go NAPSACC intervention provides ECE sites with the best practice standards in each module. These standards include, but are not limited to:

- Offering fruits and vegetables without added sugars or added fats
- Serving healthier beverages, making water easily accessible and available

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<sup>53</sup> Center TRT Nutrition and Physical Activity Self-Assessment for Child Care (NAP SACC).

- Providing culturally appropriate menus with a variety of foods
- Role modeling healthy behaviors and participating in supportive feeding practices
- Providing nutrition and physical activity education to staff, children, and families
- Creating policies to support nutrition, breastfeeding, physical activity, etc.
- Providing preschool children with at least 120 minutes of physical activity (including structured and unstructured) and not withholding active time for misbehavior
- Making a wide variety of play equipment available both indoors and outdoors
- Limiting screen time

DPH SNAP-Ed will promote creation and adoption of policies to support systems or environmental changes through the delivery of the Go NAPSACC intervention. In an effort to expand implementation and increase the reach and impact, DPH will implement Go NAPSACC in 15 ECE sites in FY 2020.

Number of HS, SR, and ECE Sites	Number of Estimated Reach
15	900

*Breastfeeding Friendly Child Care Recognition Program*

DPH SNAP-Ed staff, in partnership with the State WIC program and the Connecticut Breastfeeding Coalition (CBC), will advance breastfeeding in its programming through the development and promotion of a statewide Breastfeeding-Friendly Child Care Recognition (BFCCR) program. The BFCCR program, in its developmental phase, is based on evidence-based breastfeeding support strategies as recognized in the Surgeon General’s Call to Action to Support Breastfeeding and the Centers for Disease Control and Prevention’s (CDC) Strategies to Prevent Obesity and Other Chronic Diseases: The CDC Guide to Strategies to Support Breastfeeding Mothers and Babies.<sup>54,55</sup> The BFCCR program aims to increase breastfeeding duration rates, community breastfeeding support, and compliance with state and federal lactation accommodation law in ECE sites. The DPH SNAP-Ed will assist with the development of the BFCCR program, and conduct key activities including assisting with the

<sup>54</sup> U.S. Department of Health and Human Services. The Surgeon General’s Call to Action to Support Breastfeeding. Washington, DC: U.S. Department of Health and Human Services, Office of the Surgeon General; 2011.

<sup>55</sup> U.S. Department of Health and Human Services. Overweight & Obesity Prevention Strategies & Guidelines. Washington, DC: U.S. Department of Health and Human Services, Division of Nutrition, Physical Activity, and Obesity; 2018.

development of lactation policies and practices at ECE sites that either employ or serve the SNAP eligible population.

In addition, DPH SNAP-Ed staff, in collaboration with the State WIC program, will continue to support and promote the “It’s Worth It!” breastfeeding campaign. Based on the Ten Steps to Successful Breastfeeding, It’s Worth It! is an existing statewide breastfeeding campaign developed by the State WIC program in collaboration with the CT Breastfeeding Coalition and DPH State Public Health Actions to Prevent and Control Diabetes, Heart Disease, Obesity and Associated Risks Factors and Promote School Health (SHAPE) grant staff. On-going communications and shared materials help ensure consistency of breastfeeding messages, avoid duplication, and enhance the educational opportunities for WIC clients, who are also SNAP eligible.

Key Messages:

### **It’s Worth It!**

- Make a Plan – communicate your breastfeeding goals with your family, friends and health care providers
- Skin to Skin and Rooming-in are two important hospital maternity care practices
- Community Support – everyone has role in breastfeeding support; identify your support system early
- Make it Work – Plan and prepare ahead for a successful return to work or school

### **BFCCR**

- Have a written breastfeeding policy that is routinely communicated to all ECE staff
- Welcome on-site breastfeeding
- Make a private space available for breastfeeding or pumping
- Train all staff in the skills necessary to implement the policy
- Provide families with information about breastfeeding support and protocols of the site
- Connect families to community-based resources or support groups as needed

In FY 2019, DPH SNAP-Ed staff, in collaboration with the State WIC program and CBC developed toolkits for center and home-based providers to support the BFCCR program, which included an organizational self-assessment, goal setting tools, and resources to assist with implementation of selected goals. A family-based toolkit was developed as a resource to support parents as they return to work or school. The family-based toolkit was designed to incorporate the It’s Worth It! Make it Work theme. DPH SNAP-Ed staff will work with ECE sites and other community partners to distribute



this as well as previous It's Worth It! materials to expand reach of the BFCCR project. In FY 2020, two ECE sites will be recruited to participate in the BFCCR program pilot. **These sites will be provided with the toolkits developed in FY 2019**, and will receive training and targeted technical assistance for achieving BFCCR status. Technical assistance will include developing breastfeeding policies, facilitating staff training, connecting programs to community resources, and working with staff to overcome barriers to implementation of program requirements.

Number of HS, SR, and ECE Sites	Number of Estimated Reach
2	125

**Evidence Base:**

Multi-component nutrition education strategies will increase a person's nutrition knowledge and self-efficacy which is instrumental to making healthy lifestyle behavior changes. Effective health education interventions require both intensity and duration – such as a series of interactive workshops that include healthy cooking – to increase the likelihood of positive, permanent behavior change. For instance, studies have found that parents have a desire to attend nutrition education workshops on the following topics: what to purchase, how to cook healthier foods, how to encourage their children to eat healthier, and how to read food labels.<sup>56</sup> Additionally, WIC clients reported facilitated group discussions and cooking classes as preferred methods of nutrition education.<sup>57</sup> To help clients make behavior changes, the SNAP-Ed curricula include easy steps to initiate healthy eating habits in clients' busy lives by explaining the components of a healthy diet, improving shopping skills, and demonstrating how to serve healthy meals. For many people it is difficult to make changes to their diet. Social Cognitive Theory has demonstrated that self-efficacy (a person's belief or confidence in his or her ability to execute a given behavior) is a strong predictor of later success across a variety of different situations.<sup>58</sup> When a person experiences a positive change, they are more willing to persist longer and try harder to change behavior.<sup>59</sup> There is evidence that

<sup>56</sup>Slusser W, Prelip M, Kinsler J, Erausquin JT, Thai C, Neumann C. Challenges to parent nutrition education: a qualitative study of parents of urban children attending low-income schools. *Public health nutrition*. 2011;14:1833-1841.

<sup>57</sup>Birkett D, Johnson D, Thompson JR, Oberg D. Reaching low-income families: focus group results provide direction for a behavioral approach to WIC services. *J Am Diet Assoc* 2004;104:1277-1280.

<sup>58</sup>Glanz K, Rimer BK, Viswanath K, eds. *Health Behavior and Health Education 4<sup>th</sup>ed*. San Francisco, CA: John Wiley & Sons, Inc.; 2008

<sup>59</sup>Guthrie JF, Variyam JN. Nutrition information can it improve the diets of low-income households? *USDA Economic Research Service*. 2007.

providing nutrition education improves the diet quality of low-income households.<sup>60,61</sup> Education sessions that are interactive, hands-on, and incorporate food are effective with adult learners.<sup>62</sup> Consumers modify their food choices in response to scientific information linking diet and health.<sup>63</sup> The use of nutrition education sessions, which includes food tastings, increases the understanding and the retention of nutrition information<sup>64</sup>, and increases participants' interest in food and cooking.<sup>65</sup> Cooking classes, demonstrations, or tasting events with recipes can be effective ways to increase self-efficacy in preparing healthy foods which improves the likelihood that the client will be able to follow through with the behavior change.<sup>66</sup>

### ***Eating Smart • Being Active***

The *Eating Smart • Being Active* curriculum is based on the 2015-2020 Dietary Guidelines for Americans and *MyPlate*, both of which are based on the most current research in food and nutrition. Teaching methodologies in *Eating Smart • Being Active* are based upon the Social Cognitive Theory and adult learning principles. Nutrition educators using *Eating Smart • Being Active* give low income parents the knowledge and skills needed to choose healthy foods, keep foods safe to eat, increase their level of physical activity, and stretch their food resources further increasing their level of food security.<sup>67</sup> Supplemental activities such as relevant and practical education materials<sup>68</sup> and nutrition education sessions reinforce the nutrition messages. The *MyPlate for My Family (MPFMF)* curriculum developed by USDA FNS is a *MyPlate* resource that supports SNAP-Ed nutrition education and obesity prevention efforts. The curriculum is based on recommendations from the Dietary Guidelines for Americans. It is targeted to parents and caregivers who are SNAP participants or eligible for SNAP, and play a key role in planning, purchasing and preparing food for their families.<sup>69</sup>

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<sup>60</sup> Ibid.

<sup>61</sup> Hersey J, Anliker J, Miller C, Mullis RM, Daugherty S, Das S, Bray CR, Dennee P, Sigman-Grant M, Thomas HO. Food shopping practices are associated with dietary quality in low-income households. *JNE*. 2001;33:S16-S26.

<sup>62</sup> Manilla B, Keller HH. Food tasting as nutrition education for older adults. *Can J Diet Prac Res*. 2010;71:99-102.

<sup>63</sup> Guthrie JF, Variyam JN.

<sup>64</sup> Colapinto C, Malaviarachchi D. Paint your plate: effectiveness of a point-of-purchase display. *Can J Diet Prac Res*. 2009;70:(2):66-71.

<sup>65</sup> Manilla B, Keller HH.

<sup>66</sup> Hildebrand DA, Betts NM. Assessment of stage of change, decisional balance, self-efficacy, and use of processes of change of low-income parents for increasing servings of fruits and vegetables to preschool-aged children. *J NutrEduc and Behav*. 2009;41:110-119.

<sup>67</sup> Eating Smart Being Active.

<sup>68</sup> Harmon AH, Grim BJ, Gromis JC. Improving nutrition education newsletters for the food stamp eligible audience. *Health PromotPract* 2007 Oct;8(4):394-402.

<sup>69</sup> USDA SNAP-Ed Connection. <https://snaped.fns.usda.gov/nutrition-education/fns-curricula/myplate-my-family>. Accessed on June 19, 2019.

Handouts from *MPFMF* for each lesson topic will be used to further help participants understand relevant Dietary Guidelines recommendations for a healthier lifestyle. These handouts provide information about the amount of food to eat each day from each food group; tips on buying foods on a budget; making small, simple changes; motivating children to eat healthier foods; and being physically active every day.<sup>70</sup> Telephone coaching has been shown to improve health behavior, self-efficacy and health status, and provides a cost effective method of access to this service.<sup>71</sup> Health coaching skills will be incorporated into the training of all nutrition educators. These skills which include eliciting client engagement, active listening, affirmation, and moving to action have been shown to promote clients' behavior change.<sup>72</sup> These skills will then be incorporated by educators in all settings (workshops and nutrition education sessions, etc.).

### *Coordinated Approach to Child Health Early Childhood (CEC)*

The CEC is a community health program classified by the SNAP-Ed Strategies & Interventions: An Obesity Prevention Toolkit for States as a “research-tested” obesity prevention intervention.<sup>73</sup> CEC aligns with the CDC’s Whole Community, Whole Child (WSCC) model, an effective model for achieving national health goals which promotes a school-wide approach with a focus on the individual child, and acknowledges learning, health, and the school as being a part of the local community.<sup>74,75,76</sup> The key to the CEC and WSCC alignment is the CEC coordination of wellness efforts across the school campus and into the community.<sup>77</sup>

CEC has been successfully implemented in over 1,000 child care programs throughout the country<sup>78</sup> and has been found to produce positive health behavior outcomes in young children.<sup>79,80</sup> Studies evaluating the effectiveness of CEC have shown an increase in moderate to vigorous physical activity and fruit and vegetable intake among

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<sup>70</sup> USDA SNAP. <https://snaped.fns.usda.gov/sites/default/files/documents/EducatorsHandbook.pdf>. Accessed on June 19, 2019.

<sup>71</sup> Dennis SM, Harris M, Lloyd J, Davies GP, Faruqi N, Zwar N. Do people with existing chronic conditions benefit from telephone coaching? A rapid review. *Australian Health Review*. 2013; 37: 381-388.

<sup>72</sup> Lipscomb R. Health coaching: a new opportunity for dietetics professionals. *Journal of the American Dietetic Association*. 2007; 107: S14-S16.

<sup>73</sup> CATCH Early Childhood (CEC).

<sup>74</sup> Idid.

<sup>75</sup> How CATCH aligns with the WSCC Model. 2018. Available at: <http://catchinfo.org/wp-content/uploads/2016/03/CATCH-alignment-with-WSCC-model.pdf> Accessed 19 Jun. 2019

<sup>76</sup> Michael SL, Merlo CL, Basch CE, Wentzel KR, Wechsler H. Critical connections: health and academics. *J Sch Health*. 2015; 85: 740-758.

<sup>77</sup> How CATCH aligns with the WSCC Model.

<sup>78</sup> CATCH Early Childhood (CEC).

<sup>79</sup> Michael SL, Merlo CL, Basch CE, Wentzel KR, Wechsler H.

<sup>80</sup> CATCH Early Childhood Evidence Summary. 2018. Available at: [http://catchinfo.org/wp-content/uploads/2014/10/CEC\\_evidence-summary-copy.pdf](http://catchinfo.org/wp-content/uploads/2014/10/CEC_evidence-summary-copy.pdf) Accessed 19 Jun. 2019.

children, a reduction in whole milk intake in favor of low-fat or skim milk, an increase in the serving of fruits and vegetables during snack time, and a decrease in childhood overweight and obesity.<sup>81,82,83,84,85</sup> In addition, CEC has been tested in sites which service a large majority of children from low-income households, indicating the potential for similar success in Connecticut's SNAP-Ed target audience.<sup>86</sup>

The CEC intervention provides children an environment where physical activity, health education, gardening and healthy eating behaviors are valued and taught. The Community Preventive Services Task Force highlights that regular exposure to fruits and vegetables in childhood can result in an increased consumption.<sup>87</sup> Specifically, gardening-based interventions, such as incorporation of garden-based lesson plans in the classroom, have shown to increase children's willingness to try and preference for fruits and vegetables.<sup>88</sup> The CEC program also emphasizes family involvement through education and support for families to incorporate physical activity and nutrition into the home routine to promote consistent messaging between the home and school environments. Research has shown that parent engagement in school activity is associated with better student behavior, increased academic achievement and makes students more likely to avoid unhealthy and risky behaviors.<sup>89</sup>

#### *Nutrition and Physical Activity Self-Assessment for Child Care (Go NAPSACC)*

**Go NAPSACC** is a research-tested obesity prevention intervention designed to enhance nutrition and physical activity practices in ECE sites.<sup>90,91</sup> **Go NAPSACC** primarily addresses the interpersonal and organizational levels of the socioecological model.<sup>92</sup>

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<sup>81</sup> Ibid.

<sup>82</sup> Sharma S, et al. The CATCH Early Childhood program increases moderate-to- vigorous physical activity among low-income preschoolers: results from a pilot study. 2014. Under review.

<sup>83</sup> Sharma SV, Chuang R, Rahman G. Results of pilot testing CATCH Early Childhood in Head Start preschoolers in Texas [abstract]. In: ISBNPA 2012 Oral Sessions. 2012; p145.

<sup>84</sup> Dunn Carver M, Pope L, Dana G, Dorwaldt A, Flynn B, Bunn J, Harvey-Berino J. (2013). Evaluation of a teacher-led physical activity curriculum to increase preschooler physical activity. *Open Journal of Preventive Medicine*. 2013; 3(1):1415-147.

<sup>85</sup> Sharma S, Chuang R, Hedberg, A. M. Pilot-testing CATCH Early Childhood: a preschool-based healthy nutrition and physical activity program. *American Journal of Health Education*. 2011; 12(1):125-23.

<sup>86</sup> CATCH Early Childhood Evidence Summary.

<sup>87</sup> Guide to Community Preventive Services. TFFRS - Nutrition: Gardening Interventions to Increase Fruit and Vegetable Consumption Among Children. <https://www.thecommunityguide.org/content/tffrs-nutrition-gardening-interventions-increase-fruit-and-vegetable-consumption-among-children>. Page last updated: March 27, 2018. Page accessed: **June 19, 2019**

<sup>88</sup> Ibid.

<sup>89</sup> Centers for Disease Control and Prevention. Parent Engagement: Strategies for Involving Parents in School Health. Atlanta, GA: U.S. Department of Health and Human Services; 2012. [https://www.cdc.gov/healthyyouth/protective/pdf/parent\\_engagement\\_strategies.pdf](https://www.cdc.gov/healthyyouth/protective/pdf/parent_engagement_strategies.pdf)

<sup>90</sup> Center TRT Nutrition and Physical Activity Self-Assessment for Child Care (NAP SACC).

<sup>91</sup> Go Nutrition and Physical Activity Self-Assessment for Child Care (Go NAP SACC) 2016.

<sup>92</sup> Center TRT Nutrition and Physical Activity Self-Assessment for Child Care (NAP SACC).

Using constructs of Social Cognitive Theory, **Go NAPSACC** is delivered through direct nutrition education and PSE approaches focused on improving the nutritional quality of food served, amount and quality of physical activity, provider-child interactions around food and physical activity, educational opportunities for children, parents, and providers, and program policies related to nutrition and physical activity.<sup>93</sup>

**Go NAPSACC** has been implemented in at least 30 states and internationally.<sup>94</sup> During research trials, facilities randomly selected to implement the intervention, and which completed most or all of the intervention components, improved their nutrition and physical activity policies and practices and showed a statistically significant increase in total child care nutrition and physical activity environment scores when compared to control facilities.<sup>95</sup>

### *Breastfeeding Friendly Child Care Recognition Program*

Research has shown that breast milk is the optimal source of nutrition for infants and provides protective health benefits including reduced risk of childhood overweight and obesity.<sup>96,97</sup> The Academy of Pediatrics recommends that infants be fed breast milk exclusively for the first 6 months after birth and should continue to receive breast milk with the addition of complementary solids until the child's first birthday, or as long as mutually desired by mother and child.<sup>98</sup> In CT, 84.9% of mothers initiate breastfeeding, while only 26.1% of those continue through 6 months and only 33% continue throughout the first year.<sup>99</sup>

There are multiple factors that influence a woman's decision to start and continue breastfeeding. For example, lack of access to competent professional care or peer support, inadequate breastfeeding education and information, unsupportive maternity care practices, and early returning to work.<sup>100</sup> With 57% of all mothers with infants

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<sup>93</sup> Ibid.

<sup>94</sup> Go Nutrition and Physical Activity Self-Assessment for Child Care (Go NAP SACC) 2016.

<sup>95</sup> Yarber L, Brownson CA, Jacob RR, Baker EA, Jones E, Baumann C, et al. Evaluating a train-the-trainer approach for improving capacity for evidence-based decision making in public health. *BMC Health Serv Res*. 2015;15, 547. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4676893/>

<sup>96</sup> U.S. Department of Health and Human Services. The Surgeon General's Call to Action to Support Breastfeeding.

<sup>97</sup> U.S. Department of Health and Human Services. Overweight & Obesity Prevention Strategies & Guidelines.

<sup>98</sup> American Academy of Pediatrics. (2012). Breastfeeding and the use of human milk. *Pediatrics*, 129(3), e827–e841. <http://pediatrics.aappublications.org/content/129/3/e827> Accessed **June 19, 2019**.

<sup>99</sup> Centers for Disease Control and Prevention. National Center for Chronic Disease Prevention and Health Promotion, Division of Nutrition, Physical Activity, and Obesity. Data, Trend and Maps [online]. <https://www.cdc.gov/nccdphp/dnpao/data-trends-maps/index.html>. Accessed **June 19, 2019**.

<sup>100</sup> Centers for Disease Control and Prevention. Strategies to Prevent Obesity and Other Chronic Diseases: The CDC Guide to Strategies to Support Breastfeeding Mothers and Babies. Atlanta: U.S. Department of Health and Human Services; 2013.

employed, and nearly 70% of children under the age of 6 in center-based child care, ECE sites are a critical component of a family's breastfeeding support system.<sup>101,102</sup> ECE providers influence the lives and health of their families and are an important source of support for breastfeeding mothers.

The CDC's Strategies to Prevent Obesity and Other Chronic Diseases: The CDC Guide to Strategies to Support Breastfeeding Mothers and Babies includes 9 community based strategies to increase breastfeeding rates and improve outcome measures.<sup>103</sup> Strategy 6 highlights the importance of supporting breastfeeding in ECE sites. In addition to ensuring the safe handling, storage and appropriate feeding of breastmilk through staff training and site policies, ECE support for mothers may also include welcoming mothers to breastfeed on-site and providing a private space to do so as requested.<sup>104,105</sup> In addition, ECE sites can provide families with print materials and resources that communicate site's policies and procedures and the benefits of breastfeeding, or connect mothers to breastfeeding services located within the community so they do not wean their infants prematurely.<sup>106</sup>

Implementation of these types of ECE based breastfeeding support practices have shown to be effective. A longitudinal study that followed mothers from the third trimester until children were age 1 year, found that breastfeeding at 6 months was significantly associated with support from ECE providers to feed expressed breast milk to infants and allow mothers to breastfeed on-site before or after work.<sup>6</sup> A survey that addressed five questions about breastfeeding support found that mothers who said they received all five of the supports were three times as likely to be breastfeeding at 6 months as mothers who said they received less than three supports.<sup>107</sup>

### ***Key Performance Indicators (KPIs):***

The Preschool, Families, and Community Project participants will improve their knowledge, skills, and self-efficacy regarding the identified key messages. The

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<sup>101</sup> Ibid.

<sup>102</sup> Early Childhood Program Participation Survey of the National Household Education Surveys Program (ECP-P-NHES:2005). National Center for Education Statistics Web site. [http://nces.ed.gov/programs/digest/d09/tables/dt09\\_044.asp](http://nces.ed.gov/programs/digest/d09/tables/dt09_044.asp) . Accessed June 19, 2019.

<sup>103</sup> Ibid.

<sup>104</sup> Ibid.

<sup>105</sup> American Academy of Pediatrics, American Public Health Association, National Resource Center for Health and Safety in Child Care and Early Education. Caring for Our Children: National Health and Safety Performance Standards; Guidelines for Early Care and Education Programs. 3rd ed. Elk Grove Village, IL: American Academy of Pediatrics; 2011. <https://nrckids.org/CFOC>. Accessed June 20, 2019.

<sup>106</sup> Ibid.

<sup>107</sup> American Academy of Pediatrics, American Public Health Association, National Resource Center for Health and Safety in Child Care and Early Education.

implementation and performance measures listed below will be collected to evaluate the project.

#### Train-the-trainer, Coordinated Approach to Child Health Early Childhood (CEC)

- Number of ECE centers/sites that participated in CEC training
- Number of ECE teachers/staff that attended CEC training
- Number of preschool children reached/impacted as result of efforts implemented through the CEC training

#### Nutrition Classroom Lessons

- Number of preschools/classrooms that taught nutrition lessons in their classrooms **using the CEC nutrition education curriculum**
- Number of preschool children that received nutrition education through Nutrition Classroom Lessons
- Number of classroom and mealtime minutes spent on teaching nutrition and physical activity messages to the preschoolers, **using the CEC nutrition education curriculum**
- Number of minutes preschoolers spent on physical activity

#### Eating Smart • Being Active nutrition education workshops and nutrition education sessions for families of preschool children and adults/families

- Number of nutrition education workshops conducted
- Number of nutrition education sessions conducted
- Number of preschools, WIC offices, Community Health Centers, and Community Partner Locations that participated in the nutrition education workshops and nutrition education sessions
- Number of participants in the nutrition education workshops and nutrition education sessions
- Percent of participants that report increased knowledge that half of their plates should be fruits and vegetables
- Percent of participants that report increased knowledge that half of their grains should be whole grains
- Percent of participants that report increased knowledge that they should include food from all five food groups every day
- Percent of participants that report increased knowledge that adults should get at least 30 minutes of physical activity per day
- Percent of participants report that they are confident to include all 5 food groups in their meals every day
- Percent of participants report that they are confident to increase their fruits and vegetables consumption by 1 cup per day

- Percent of participants report that they are confident to replace sugar-sweetened beverage with water
- Percent of participants report that they are confident to replace refined grains with whole grains food daily
- Percent of participants report that they are confident to switch to low-fat dairy
- Percent of participants report that they are confident to reduce their sodium/salt intake
- Percent of participants report that they are confident to increase their physical activity
- Percent of participants report that they are confident to replace high fat meat/protein with a lean source of protein in their meals
- Percent of participants report that they increased their consumption of fruits and vegetables by half of a cup or more
- Percent of participants report that they increased their consumption of whole grain food as compared to non-whole grain food
- Percent of participants report that they switched to a lower fat milk
- Percent of participants report that they increased their physical activity by 60 minutes per week
- Percent of participants report that they increased the number of days where they usually include food from all five food groups in their diet
- Percent of participants report that they decreased their sugar-sweetened beverage intake
- Percent of participants report that they decreased consumption on fatty proteins
- Percent of participants report that they decreased salt/sodium intake
- Percent of participants report that they increased the frequency of using food safety practices at home
- Percent of participants report that they increased the frequency of using strategies to stretch their food dollars at the grocery store
- Percent of participants report that they increased the likelihood of using “Nutrition Facts” on the food label to make healthier food purchases

Nutrition and Physical Activity Self-Assessment for Child Care (Go NAPSACC)

- Number of ECE centers/sites that participated in Go NAPSACC training
- Number of ECE teachers/staff that attended/impacted by Go NAPSACC training
- Number of ECE centers/sites that completed an organizational self-assessment
- Number of preschool children reached/impacted as result of efforts implemented through the Go NAPSACC training



- Percentage change in ECE centers/sites meeting best practice standards as outlined in the Go NAPSACC modules

#### Breastfeeding Friendly Child Care Recognition (BFCCR)

- Number of ECE centers/sites that participated in BFCCR training
- Number of ECE teachers/staff that attended BFCCR training
- Number of target audience reached/impacted as result of efforts implemented through the BFCCR training

#### ***Use of Existing Educational Materials:***

This project utilizes the existing *Eating Smart • Being Active* curriculum, Coordinated Approach to Child Health (CATCH), and Nutrition and Physical Activity Self-Assessment for Child Care (Go NAPSACC) to teach nutrition education to preschoolers and their families.

#### *Eating Smart • Being Active*

The *Eating Smart • Being Active*, in English and Spanish, is a nutrition education, healthy lifestyles curriculum for low income adults including those with young children developed at Colorado State University and University of California at Davis. The lesson plans of *Eating Smart • Being Active* are detailed and appropriate for use by nutrition educators when teaching low income families about healthy lifestyle choices. The curriculum consists of eight core lessons. The information included in *Eating Smart • Being Active* is based on the latest research in health and nutrition from the 2015-2020 Dietary Guidelines for Americans and MyPlate. Each topic has a key message linked to one or more of the 2015-2020 USDA Dietary Guidelines for Americans key recommendations. All participant materials are available in English and Spanish.

The authors of *Eating Smart • Being Active* utilized the Social Cognitive Theory as well as adult learning principles when developing the curriculum. These principles of adult learning are incorporated throughout the curriculum activities and materials. Curriculum activities include facilitated discussion (dialogue-based learning) and hands-on activities such as menu planning. These activities help participants to be actively engaged in the learning process, increasing their retention of the new information and increasing the chances of behavior change. *Eating Smart • Being Active* can be used to teach adults one-on-one or in small group workshops. The curriculum includes:

#### Lesson Titles and Focus

- Get Moving!: physical activity is part of a healthy lifestyle
- Plan, Shop, Save: how to stretch your food dollars

- Fruits & Veggies - Half Your Plate: how to increase amount and variety of fruits and vegetables
- Make Half Your Grains Whole: identify whole grain foods and why grains are beneficial
- Build Strong Bones: calcium rich foods and weight bearing activity help build strong bones
- Go Lean With Protein: choosing lean sources of protein and how to keep food safe
- Make a Change: choosing foods low in fat, sugar, and salt, and
- Celebrate! Eat Smart and Be Active: review of key concepts and how to involve family in good food choices.

Material Cost:

*Eating Smart • Being Active* used for the Preschool, Families and Community Project includes purchasing handouts designed specifically for each lesson in the curriculum as listed above. These materials are copyright protected and non-reproducible and therefore, must be purchased. The cost incurred will be approximately \$1,600 per year.

Supplemental materials from approved USDA sources, available in English and Spanish at no cost, are used as needed from the following resources:

- **Start Simple with MyPlate:** <https://www.choosemyplate.gov/start-simple-myplate>
- ChooseMyPlate [www.choosemyplate.gov](http://www.choosemyplate.gov) including ChooseMyPlate for preschoolers [www.choosemyplate.gov/preschoolers](http://www.choosemyplate.gov/preschoolers)
- 2015-2020 Dietary Guidelines for Americans: <http://www.cnpp.usda.gov/>
- FNS Core Nutrition Messages: <http://www.fns.usda.gov/core-nutrition/core-nutrition-messages>
- 2008 Physical Activity Guidelines for Americans  
<http://www.health.gov/paguidelines/guidelines/summary.aspx>
- SNAP-Ed Nutrition Connection, Resource Library: <http://snap.nal.usda.gov>
- USDA National Agricultural Library, Food and Nutrition information Center: [www.http://fnic.nal.usda.gov/](http://www.fnic.nal.usda.gov/)
- CDC Fruits & Veggies Matter: <http://www.fruitsandveggiesmatter.gov/index.html>
- National Dairy Council: [www.nationaldairycouncil.org](http://www.nationaldairycouncil.org)
- USDA Know Your Farmer, Know Your Food: <http://www.cnpp.usda.gov/KnowYourFarmer.htm>
- Partnership for Food Safety Education Fight Bac!: <http://www.fightbac.org/>
- Team Nutrition <http://teamnutrition.usda.gov>

- Let's Move! Child Care:  
<http://www.healthykidshealthyfuture.org/welcome.html>
- Head Start I Am Moving, I Am Learning:  
<https://eclkc.ohs.acf.hhs.gov/hslc/tta-system/health/center/healthy-active-living/imil>
- Connecticut State Department of Education: Action Guide for Child Care Nutrition and Physical Activity Policies:  
[http://www.sde.ct.gov/sde/lib/sde/PDF/DEPS/Student/NutritionEd/CCAG\\_Acti onGuide.pdf](http://www.sde.ct.gov/sde/lib/sde/PDF/DEPS/Student/NutritionEd/CCAG_Acti onGuide.pdf)
- Color Me Healthy: <http://www.colormehealthy.com/>
- MyPlate for My Family: <https://snaped.fns.usda.gov/nutrition-education/fns-curricula/myplate-my-family>

### Coordinated Approach to Child Health for Early Childhood (CEC)

The CEC curriculum will be incorporated as a classroom lesson resource for teachers. The emphasis will be incorporating the gardening theme as a way of introducing fruits and vegetables to children. Depending on the specific peak seasons, different fruits and vegetables will be discussed. CEC materials were created by CATCH Global Foundation, the University of Texas Health Science Center at Houston and are required for implementation of the CEC intervention. The kit has a teacher manual, hand puppets, a CEC Physical Activity Box, and the CEC Coordination Guide. The kit also contains: hands-on activities, planting activities, nutrition education activities, parent tip sheets, recipes, newsletters, and wellness activities. Materials are copyrighted and must be purchased for use. Each participating ECE site requires one CEC Kit and an online subscription to download additional copies of the curriculum and CEC Coordination Guide. The CEC Kits are available for purchase at [www.FlagHouse.com](http://www.FlagHouse.com) and the downloadable curriculum and CEC Coordination Guide are available at [www.CatchInfo.org](http://www.CatchInfo.org). Supplemental implementation resources (e.g., books with a nutrition/physical activity focus, music CDs, bean bags, etc.) will be provided throughout the year to support CEC goals and to encourage submission of programmatic reporting. These items are purchased from a variety of state-approved vendors that supply educational materials. The cost incurred will be approximately \$7,500 per year.

### Nutrition and Physical Activity Self-Assessment for Child Care (Go NAPSACC)

**Go NAPSACC** was developed by University of North Carolina Center for Health Promotion and Disease Prevention. Materials necessary for implementation of **Go NAPSACC** include intervention materials, informational materials, and implementation resources, available on the online platform.

### **Intervention Materials:**

- **The self-assessment instrument, with samples**

- The Action Planning Document, with examples
- Sample nutrition and physical activity policies

Informational Materials:

- Go NAPSACC handouts for providers (English and Spanish)
- Go NAPSACC brochure and handouts for parents (English and Spanish)
- Go NAPSACC Best Practice Recommendations

Implementation Resources:

Each program enrolled in the Go NAPSACC intervention will receive a resource kit to ensure site-level implementation. The kit includes a variety of nutrition and physical activity resources, which may include:

- Activity Beanbags and Beanbag Fun CD
- Activity Scarves and Musical Scarves Activity CD
- Wrist Ribbons
- Foods Vocabulary Development Photo Card Library
- Choosy Kids – Music Moves Me CD (Available in English and Spanish)
- The Animal Boogie Book and CD by Fred Penner
- Growing Vegetable Soup Book by Lois Ehlert
- Dance, Turn, Hop, Learn! By Connie Bergstein Dow

Breastfeeding Friendly Child Care Recognition (BFCCR) Program

DPH SNAP-Ed will use the previously developed It's Worth It! campaign materials (e.g., posters, newsletters, and checklists) to expand reach of the BFCCR program to SNAP eligible populations. In addition, DPH SNAP-Ed will adapt existing toolkits and training modules from the Colorado Department of Public Health and Environment to ensure consistency with the It's Worth It! campaign and with state specific lactation accommodation law. Updated toolkits and training materials will be submitted for review by USDA FNS.

***Development of New Educational Materials:***

FY 2020 SNAP-Ed funds will not be used on the development of new educational materials.

***Evaluation Plans***

***Name:***

Connecticut Department of Public Health – Preschool, Families, and Community Project

***Type:***

Process and outcome assessments.

**Questions:**

Questions that will be addressed through evaluation process mirror the Key Performance Indicators as discussed above.

**Approach(es):**

The DPH, in conjunction with the USJ, has developed a systematic method for collecting, analyzing, and using information with data collected from SNAP-Ed program participants to determine program effectiveness and efficiency. The Preschool, Families, and Community Project will involve process and outcome evaluation of the main nutrition activities.

For CEC, **Go NAPSACC**, and BFCCR Program, post-training surveys will be handed to the ECE teachers/staff at the end of the workshops for completion or to be completed online through SurveyMonkey. The survey will include an evaluation of their overall satisfaction of the training and an assessment in their willingness and readiness to affect PSEs in their ECEs.

For Nutrition Classroom Lessons, surveys will be mailed to teachers three times a year to capture four months of information at each time. The survey will determine how many classroom and mealtime minutes is spent teaching nutrition and physical activity messages to the students. The evaluation methodology will be to disseminate surveys to all participating school readiness programs and have their teachers complete daily nutrition activity minutes for a given week each month. The survey will include number of school readiness children in classroom; number of classrooms; mealtime nutrition minutes spent discussing food and nutrition with the children; type of learning activities; and number of minutes spent on physical activity. The survey or nutrition activity report will be sent to the DPH, and the data will be entered into an Excel or Access database. Data will then be analyzed and the results will be used to determine reach (number of preschool children), intensity (number of minutes) and coverage (geographical location) through the train-the-trainer model of educating preschoolers using key nutrition and physical activity messages.

The approaches to conducting the evaluation of *Eating Smart • Being Active* nutrition education workshops and nutrition education sessions for families of preschool children and adults/families will be to complete demographic cards and administer pre-test, post-test, and 6-week follow-up surveys.

The DPH SNAP-Ed program developed a SNAP-Ed demographic card based on Education Administration Reporting System (EARS) reporting requirements. Data collected includes date, zip code of participant's residence, gender, age, race, and ethnicity, if they are currently a SNAP participant, and if they have attended SNAP-Ed

nutrition education since October 1<sup>st</sup> of current fiscal year. The latter question was designed to determine if the participants are considered as unduplicated or duplicated counts of direct education participants. At SNAP-Ed service sites, each participant fills out a demographic card and pre and post-test surveys.

The main questions to be addressed in the pre-test and post-test surveys will be to determine participant knowledge gained, attitude toward behavior change, and client satisfaction. Each participant will be asked questions measuring their knowledge of specific USDA dietary guideline and current behavior (e.g., current level of fruit intake) before starting the nutrition education workshops or nutrition education sessions. Upon conclusion of the nutrition education, the participants will be asked to complete the post-test survey. The post-test survey will repeat the question relating to the knowledge; include question to measure confidence level of future behavior change, and questions to assess client satisfaction. Questions measuring confidence of future behavior change will be assessed using a five-point Likert Scale (1=Not at all confident, 2=Not very confident, 3=Moderately confident, 4=Very confident, 5=Totally confident). Participants will also be asked if they are willing to be contacted to assess their progress at 6-week post intervention (nutrition education). A sample of willing participants will be contacted by telephone, email, or other methods and surveyed at six-week follow-up to determine any behavioral changes as the result of receiving nutrition education.

***Planned use:***

The demographic cards and evaluation surveys will be collected and entered into the SNAP-Ed Access database. Data will then be analyzed and the results will be used to determine the reach (number of participants), knowledge gained, attitude towards modifying behavior (e.g., future level of fruit intake), outcome, client satisfaction, and coverage (geographical location). The DPH and USJ will review the evaluation findings and participant feedback at least semi-annually. The number and percent of returned surveys will be tracked and client satisfaction will be quantified. The SNAP-Ed program will work with the team of Epidemiologists to review the results and feedback provided by the participants. Collectively, the team will develop a list of action items to improve the delivery of SNAP-Ed activities based on the client feedback.

***Prior Evaluation:***

The evaluation of the Preschool, Families, and Community Project has been done on a consistent basis and most recently in FY 2019.

Below are results from FYs 2016-2018 measuring the effectiveness of *Eating Smart • Being Active* interactive workshops and nutrition education sessions. Pre-test, post-

test, and six-week follow-up evaluations were administered to assess participants' knowledge gained, attitudes towards behavioral change, and outcomes for behavioral change. The completion rate was 32.1% for the six-week follow-up. Table 1 showed the participants' knowledge gained as result of receiving nutrition education. Overall, participants demonstrated an increase in knowledge immediately after nutrition education (post-test), and they also were able to retain most of the knowledge gained six weeks after nutrition education (six-week follow-up). For example, before receiving nutrition education, 61% of the participants knew that half of their plates should be fruits and vegetables. This response increased to 90% immediately after receiving nutrition education. At the six-week follow-up, 70% of the participants were able to retain the knowledge. Similarly, 86% knew that half of their grains should be whole grains before nutrition education. This response increased to 97% after receiving nutrition education and 96% at six-week follow-up. Also, 63% knew fat free milk is the lowest in fat before nutrition education. This response increased to 87% after receiving nutrition education and 72% at six-week follow-up. Similar increased knowledge were reported on topics of saturated fat, sugar-sweetened beverage, sodium, five food groups, food label, and physical activity.

**Table 1: Knowledge Gained as Result of Receiving Nutrition Education (FY 2016-2018).**

	Pre <sup>1</sup>		Post <sup>2</sup>		Six-week <sup>3</sup>	
	N <sup>4</sup>	% correct	N <sup>4</sup>	% correct	N <sup>4</sup>	% correct
Half of your plate should be fruits and vegetables	1737	60.7	1703	89.8	249	70.3
Half of your grains should be whole grains	1205	85.5	1210	97.4	164	96.3
Fat free milk is the lowest in fat	1159	62.6	1136	86.6	166	72.3
Red meat (pork, beef, and lamb including hot dogs) is high in saturated fat	1149	91.1	1105	97.2	144	97.9
Foods that are grilled, broiled and roasted are lower in saturated fat	1135	85.5	1103	94.8	142	94.4
Drinking less sugar-sweetened beverage reduces calorie intake	1128	89.2	1099	95.6	152	99.3
Adding salt when cooking or eating increases sodium intake	1084	90.6	1071	96.9	148	97.3
All five food groups should be eaten every day	1063	74.3	1016	85.5	185	91.9
Using the Nutrition Facts on the food label can help to make healthy food choices	1623	94.9	1571	98.8	281	99.3

	Pre <sup>1</sup>		Post <sup>2</sup>		Six-week <sup>3</sup>	
	N <sup>4</sup>	% correct	N <sup>4</sup>	% correct	N <sup>4</sup>	% correct
Adults should get a minimum of 30 minutes of physical activity per day	938	54.5	905	81.7	172	72.7

<sup>1</sup>Question asked before participant was given nutrition education

<sup>2</sup>Question asked after participant was given nutrition education

<sup>3</sup>Question asked by calling the participant six weeks after nutrition education

<sup>4</sup>Total number of participants responded to the question at the specified time period

Table 2 showed the results of participants' attitude toward behavioral change. After nutrition education, 95% of the participants felt confident to increase their fruits and vegetables consumption by one cup per day; 94% reported confident to replace refined grains with whole grains food daily; 87% reported confident to switch to lower fat dairy product; 95% reported confident to replace proteins high in saturated fat with a lean source of protein; 91% reported confident to replace sugar-sweetened beverage with water; 92% reported confident to add less salt when cooking or eating; 94% reported confident to include all five food groups in their meals every day; 92% reported confident to increase their physical activity by 10 minutes per day; and 95% reported confident to use Nutrition Facts on the food label to select food.

**Table 2: Attitude toward Behavioral Change (FY 2016-2018).**

How confident are you to...	N <sup>1</sup>	% confident <sup>2</sup>
Increase fruit and vegetable intake by one cup per day [ST1] <sup>3</sup>	1703	95.3
Replace one ounce of refined grain with one ounce of whole grain food per day [ST1]	1102	93.9
Switch to or add a lower fat dairy product per day [ST1]	795	86.7
Replace proteins high in saturated fat with a lean source of protein [ST1]	985	95.3
Replace one sugar-sweetened beverage with water or sugar-free drink per day [ST1]	876	90.9
Add less salt when cooking or eating [ST1]	948	91.6
Include all 5 food groups in your meals every day [ST1]	804	93.5
Use the Nutrition Facts on the food label to select food [ST2] <sup>4</sup>	1563	94.6
Increase physical activity by 10 minutes per day [ST3] <sup>5</sup>	898	92.3

<sup>1</sup>Total number of participants responded to the question after nutrition education

<sup>2</sup>Participants who responded as moderately, very or totally confident

<sup>3</sup>[ST1] indicates Evaluation Framework Indicator Short-Term 1: Healthy Eating Goals and Intentions

<sup>4</sup>[ST2] indicates Evaluation Framework Indicator Short-Term 2: Food Resource Management Goals and Intentions

<sup>5</sup>[ST3] indicates Evaluation Framework Indicator Short-Term 3: Physical Activity and Reduce Sedentary Behavior Goals and Intentions



Table 3 showed the participant behavioral changes toward healthy eating, and these performance measures were identified as the Evaluation Framework Medium-Term Indicator 1. Two out of every three participants (66%) increased frequency of eating more than one kind of fruit or vegetable each day at six-week follow-up (including 10% continued to always eat more than one kind of fruit or vegetable each day). Three out of every five participants (61%) increased their fruit or vegetable consumption by half of a cup or more. Nine out of every ten participants (92%) increased frequency of eating at least one whole grain food as compared to refined (white) grain food; generally the participants were more likely to switch to whole grain cereal or bread then to switch to brown rice or whole grain/wheat pasta. One out of every three participants (37%) switched to a lower fat milk (including 16% continued to drink fat free, soy, rice, or almond milk). Half of the participants (50%) decreased frequency of eating proteins that are high in saturated fat; and 58% increased frequency of grilling, broiling or roasting as a way to reduce saturated fat when preparing food (including 14% continued to always grill, broil or roast foods). Two out of every three participants (65%) decreased their sugar-sweetened beverage intake (including 23% continued to drink none); 52% increased frequency of preparing foods without adding salt or salt seasoning (including 10% continued to always prepare foods without adding salt or salt seasoning); and 66% increased the number of days where they usually include food from all five food groups in their diet (including 21% continued to eat all five food groups every day).

**Table 3: Behavioral Change towards Healthy Eating [MT1]<sup>1</sup> (FY 2016-2018).**

<b>At six-weeks, percent of participants...</b>	<b>N<sup>2</sup></b>	<b>%</b>
Increased frequency or continued to always eat more than one kind of fruit each day	357	56.3
Increased frequency or continued to always eat more than one kind of vegetable each day	354	60.2
Increased frequency or continued to always eat more than one kind of fruit or vegetable each day	357	66.4
Increased fruit consumption by at least ½ cup	356	48.6
Increased vegetable consumption by at least ½ cup	356	43.3
Increased fruit or vegetable consumption by at least ½ cup	357	60.8
Increased frequency of eating at least one whole grain food as compared to refined (white) grain food	274	92.3
Switched to a lower fat milk or continued to drink fat free milk	247	36.8
Decreased frequency or continued to never eat proteins that are high in saturated fat	249	49.8
Increased frequency or continued to always grill, broil or roast food	251	58.2
Decreased consumption of sugar-sweetened beverages or continued to consume none	260	65.4
Increased frequency or continued to always prepare foods without adding salt or salt seasoning	260	51.5

<b>At six-weeks, percent of participants...</b>	<b>N<sup>2</sup></b>	<b>%</b>
Increased days eating food from all five food groups in their meals or continued to eat all five food groups every day	292	65.8

<sup>1</sup>[MT1] indicates Evaluation Framework Indicator Medium-Term 1: Healthy Eating Behavioral Changes

<sup>2</sup>Total number of participants responded to the questions both before education and six-week post education

Table 4 showed the participant behavioral changes toward food resource management, and these performance measures were identified as the Evaluation Framework Medium-Term Indicator 2. More than half of the participants (55%) increased the use of Nutrition Facts on food label to make food choices at six-week follow-up (including 9% continued to always use Nutrition Facts on food label). Two out of every five participants (45%) increased frequency of planning meals ahead of time (including 7% continued to always plan meals ahead of time); 69% increased frequency of comparing prices before buying food (including 31% continued to always compare prices before buying food); and 57% increased frequency of shopping with a grocery list (including 15% continued to always shop with a grocery list) as ways to save money at the grocery store.

**Table 4: Behavioral Change towards Food Resource Management [MT2]<sup>1</sup> (FY 2016-2018).**

<b>At six-weeks, percent of participants...</b>	<b>N<sup>2</sup></b>	<b>%</b>
Increased the frequency or continued to always use Nutrition Facts on food label to make food choices	427	55.3
Increased the frequency or continued to always planned meals ahead of time as a way to save money at the grocery store	279	44.8
Increased the frequency or continued to always compared prices before buying food as a way to save money at the grocery store	280	68.6
Increased the frequency or continued to always shopped with a grocery list as a way to save money at the grocery store	278	56.8

<sup>1</sup>[MT2] indicates Evaluation Framework Indicator Medium-Term 2: Food Resource Management Behavioral Changes

<sup>2</sup>Total number of participants responded to the question at the specified time period

Table 5 showed the participant behavioral changes toward physical activity and food safety, and these performance measures were identified as the Evaluation Framework Medium-Term Indicator 3 and 4, respectively. About two-fifth of the participants (38%) increased their physical activity by at least 60 minutes per week at six-week follow-up. For food safety practice, the majority of the participants did not let dairy foods sit outside the refrigerator for more than two hours. Nine out of every ten participants (90%) decreased frequency of letting dairy foods to sit outside the refrigerator for more than two hours (including 68% continued to never doing so). About two-thirds of the participants (62%) decreased the practice of thawing frozen foods at room temperature

(including 12% continued to never doing so), and 36% increased the use of meat thermometer to determine if meat is cooked (including 2% continued to always doing so). In addition to measuring the percent change of behavioral outcome at six-week post education vs. before education, participants were also asked during the six-week follow-up if they self-perceived of making any behavioral changes since receiving nutrition education. The results are shown in Table 6.

**Table 5: Behavioral Change towards Physical Activity [MT3]<sup>1</sup> and Food Safety [MT4]<sup>2</sup> (FY 2016-2018).**

<b>At six-weeks, percent of participants...</b>	<b>N<sup>3</sup></b>	<b>%</b>
Increased physical activity by at least 60 minutes per week	248	38.3
Decreased the frequency or continued to never let dairy foods sit outside the refrigerator for more than two hours	164	90.2
Decreased the frequency or continued to never thaw frozen foods at room temperature	141	61.7
Increased the frequency or continued to always use a meat thermometer to determine if meat is cooked	142	35.9

<sup>1</sup>[MT3] indicates Evaluation Framework Indicator Medium-Term 3: Physical Activity and Reduced Sedentary Behavioral Changes

<sup>2</sup>[MT4] indicates Evaluation Framework Indicator Medium-Term 4: Food Safety Behavioral Changes

<sup>3</sup>Total number of participants responded to the question at the specified time period

**Table 6: Self-Perception of Behavioral Change since Receiving Nutrition Education (FY 2016-2018).**

<b>Since receiving nutrition education, percent of participants self-perceived to have...</b>	<b>N<sup>1</sup></b>	<b>%</b>
Increased eating fruits and vegetables by more than ½ portion per day	234	83.3
Replaced one portion of refined (white) grain food with one portion of whole grain food	153	78.4
Switched from eating regular yogurt to low-fat yogurt	87	63.2
Switched from eating regular cheese to low-fat cheese	116	40.5
Replaced proteins high in saturated fat with a lean source of protein	129	80.6
Increased or added at least one cooking method (grilling, broiling or roasting)	140	70.7
Replaced one cup of sugar-sweetened drink with water	144	74.3
Added less salt when cooking or eating	142	73.9
Increased eating all five food groups every day	171	81.3
Increased the use of Nutrition Facts on the food label to make healthy food choices	400	81.5
Increased or added physical activity	163	68.7

<sup>1</sup>Total number of participants responded to the question at six weeks after nutrition education

**Use of SNAP-Ed Evaluation Framework:**

The Evaluation Framework indicators used by the evaluation plan for the Connecticut Department of Public Health – Preschool, Families, and Community Project include:

- ST1 (Healthy Eating Goals and Intentions)
- ST2 (Food Resource Management Goals and Intentions)
- ST3 (Physical Activity and Reduce Sedentary Behavior Goals and Intentions)
- MT1 (Healthy Eating Behavioral Changes)
- MT2 (Food Resource Management Behavioral Changes)
- MT3 (Physical Activity and Reduce Sedentary Behavioral Changes)
- MT4 (Food Safety Behavioral Changes)

### ***Coordination of Efforts***

The DPH will conduct SNAP-Ed evidence based, interactive programming targeting preschool children, their families, and SNAP participants, low-income individuals eligible to receive benefits, and individuals residing in communities with significant low-income population through multiple established partnerships. DPH SNAP-Ed initiatives are conducted in collaboration with USJ who network with current partners, other agencies, organizations, and programs that work with the SNAP eligible participants. The DPH and USJ will share a schedule of activities on the centralized SNAP-Ed calendar managed by DSS, and will work closely together to avoid duplication of SNAP-Ed services in Connecticut.

HS/SR Programs: DPH has consistently provided these programs to numerous HS/SR programs located in areas of the state with median household incomes  $\leq 185\%$  of the federal poverty level. Through a strong, well-established partnership with the University of Saint Joseph, DPH has expanded its SNAP-Ed programming reach to this target population throughout the state with demonstrated success.

Coordinated Approach to Child Health Early Childhood (CEC): DPH SNAP-Ed in collaboration with USJ and the CEC intervention will be coordinated with center-based ECE sites located within the priority towns and communities identified in the state's needs assessment. The DPH, through SNAP-Ed and other agency initiatives, has an extensive network of statewide and community ECE partners, including ECE sites with which SNAP-Ed staff coordinate and collaborate to ensure consistent messaging and to increase reach and impact. Partner organizations include but are not limited to: the Connecticut Office of Early Childhood, the Rudd Center for Food Policy and Obesity, the Connecticut State Department of Education, the New England Head Start Training and Technical Assistance Network, Child Health and Development Institute, local health departments, YMCAs, and Boys and Girls Clubs.

Nutrition and Physical Activity Self-Assessment for Child Care (**Go NAPSACC**): Similar to CEC, the DPH will coordinate with partners at USJ to ensure a multi-layered approach in delivering **Go NAPSACC** to ECE sites. Where appropriate, SNAP-Ed activities conducted by USJ will be promoted and coordinated with those conducted by DPH to ensure that SNAP-Ed participants receive the full suite of obesity prevention interventions available through the DPH SNAP-Ed program. For example, **Go NAPSACC** participating sites will be offered the ESBA workshop series for their families, as well as training and technical assistance to achieve the Breastfeed-Friendly Child Care Recognition.

Breastfeeding Friendly Child Care Recognition Program: the DPH SNAP-Ed staff will coordinate with the WIC program to supplement and complement WIC breastfeeding services. SNAP-Ed staff will serve an advisory role in the development of the recognition program to ensure alignment with best practice standards, and will facilitate training and technical assistance to aid in the adopting of lactation policy and supportive practices in programs located within priority towns and communities as identified in the state's needs assessment.

WIC: The DPH SNAP-Ed Program collaborates directly with the DPH State WIC Program. Each year, SNAP-Ed staff in collaboration with WIC Program staff develop and disseminate correspondence to each of the twelve local WIC programs initiating SNAP-Ed programming. On-going communications and shared materials help ensure consistency of messages, avoid duplication and enhance educational opportunities for WIC clients who are also SNAP participants. In addition, SNAP-Ed staff present at the Annual WIC Meeting, nutrition education opportunities available for these agencies which complement WIC mandated nutrition education.

Commodity Supplemental Food Program (CSFP): the DPH will coordinate with CSFP to improve the health of low income elderly persons age 60 years of age and older by providing nutrition education, food tasting, and healthy recipes at assigned CSFP sites, such as Monroe Food Pantry, Bloomfield Rehoboth Church of God, Bristol A.J. DeLorenzo Towers, Executive Square House Wethersfield, Gift of Love Avon, Human Resources Agency (HRA) New Britain, Trumbull Social Services, West Haven Housing Authority, and Wethersfield Social Services.

To avoid duplication of services the following strategies will be utilized:

WIC offices – Identify current program services provided and work with the state WIC program to meet identified gaps and needs.

Community Health Centers – Identify sites not currently served by other SNAP-Ed programs in the geographic areas of Bridgeport, Hartford, Meriden, Middletown, New Britain, and New Haven.

Community Partners – To avoid duplication with other SNAP-Ed programs and minimize travel costs, the DPH will focus geographically in Connecticut’s major cities Bridgeport, Hartford, New Haven and Waterbury as well as Bristol, Danbury, East Hartford, Meriden, New Britain, Norwalk, Norwich, Stamford, West Haven, Torrington, and Windham. The DPH and USJ will continue collaboration with organizations such as food councils, End Hunger Connecticut!, Food Share Hunger Action Teams, Connecticut Food Bank, and other related community organizations and agencies to promote awareness and access to nutrition education sessions and resources as well as to encourage implementation of sustainable environmental change strategies. Collaborative efforts with these agencies involve shared communication and coordinating programming to support and promote healthy eating and physical activity.

For **FY 2020**, DPH will continue to coordinate, complement, and collaborate with other programs, agencies, and organizations to deliver comprehensive multi-level interventions, and community-based and public health approaches. Continued collaborative efforts will maximize the reach and potential impact of the SNAP-Ed Federal nutrition education program in areas of Connecticut not currently reached.

#### Civil Rights Training:

The DPH and USJ staff involved in execution of SNAP-Ed direct nutrition education programming will obtain Civil Rights training on an annual basis. Several options are currently being offered and documentation of training will be forwarded to DSS as part of the progress reporting.

## Template 3: SNAP-Ed Staffing Plan

### Staffing 2020

**Project Name: Connecticut Department of Public Health – Preschool, Families, and Community Project (FY 2020)**

Position Title Attach statement of work listing SNAP-Ed related job duties for each position	FTEs charged to SNAP-Ed Attach definition of FTE and basis for calculations	Percentage of SNAP-Ed Time Spent on Management/Administrative Duties	Percentage of SNAP-Ed Time Spent on SNAP-Ed delivery. Include all approaches described in Guidance Section 1	SNAP-Ed Salary, Benefits, and Wages Federal dollars only
<b>Program Coordinator: Idamaris Rodriguez</b>	<b>1.0 FTE</b>	<b>75%</b>	<b>25%</b> <b>Approach 1: 10%</b> <b>Approach 2: 10%</b> <b>Approach 3: 5%</b>	<b>\$143,294</b>
<b>Nutrition Consultant: Jennifer Vinci</b>	<b>0.50 FTE</b>	<b>10%</b>	<b>90%</b> <b>Approach 1: 25%</b> <b>Approach 2: 50%</b> <b>Approach 3: 15%</b>	<b>\$67,757</b>
<b>Nutrition Educator: TBD</b>	<b>0.50 FTE</b>	<b>0%</b>	<b>100%</b> <b>Approach 1: 80%</b> <b>Approach 2: 15%</b> <b>Approach 3: 5%</b>	<b>\$55,024</b>
<b>Nutrition Educator Assistant: Amor Gamarra-Gross</b>	<b>0.45 FTE</b>	<b>60%</b>	<b>40%</b> <b>Approach 1: 40%</b>	<b>\$35,576</b>

			Total Staffing Budget:	\$301,651
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## SNAP Ed related job duties 2020

### DPH – Preschool, Families, and Community Project – FY 2020

Statement of Work listing SNAP-Ed related job duties for each position:

#### **Program Coordinator: Idamaris Rodriguez**

Monitor budgets, expenditures, and contracts; provide technical assistance, coordinate nutrition education programming; design, modify, and conduct direct nutrition education; ensure consistency of program delivery; oversee, analyze, and report program evaluation; update and maintain DPH SNAP-Ed website, and assists in activities that promote policy, systems, and environmental changes.

#### **Nutrition Consultant: Jennifer Vinci**

Plan and implement the nutrition education curriculum of the SNAP-Ed program; coordinate program nutrition education activities; conduct direct nutrition education; provide training and technical assistance to administrators, nutrition staffs, and educators and assist in activities that promote policy, systems, and environmental changes at Early Childhood Centers; and attend conferences and stakeholder meetings to promote improved nutrition and physical activity policies and practices in Early Childhood Education.

#### **Nutrition Educator: TBD**

Conduct direct nutrition education; provide training and technical assistance to administrators, nutrition staffs, and educators and assist in activities that promote policy, systems, and environmental changes at Early Childhood Centers; and attend meetings to promote improved nutrition and physical activity policies and practices in Early Childhood Education.

#### **Nutrition Educator Assistant: Amor Gamarra-Gross**

Assist with nutrition education activities and community events; conduct direct and indirect nutrition education; disseminate indirect nutrition education materials; maintain database for nutrition education activities; collect and enter data on nutrition spreadsheet; and prepare staff travel and schedule transportation.

#### Definition of FTE and basis for calculations:

Full-Time Equivalent (FTE) employment, as defined by the Federal government, means the total number of straight-time hours (i.e., not including overtime pay or holiday hours) worked by employees divided by the number of compensable hours in the fiscal year. According to this definition, annual leave, sick leave, compensatory time off, and other

approved leave categories are considered “hours worked” for purposes of defining FTE employment.

**Program Coordinator: Idamaris Rodriguez**

The full-time equivalent of this position is based on a 35-hour work week. The amount of time spent by this staff on the Preschool, Families and Community Project Nutrition Education will be 100% of the time.

**Nutrition Consultant: Jennifer Vinci**

The full-time equivalent of this position is based on a 35-hour work week. The amount of time spent by this staff on the Preschool, Families and Community Project Nutrition Education will be 50% of the time.

**Nutrition Educator: TBD**

The full-time equivalent of this position is based on a 35-hour work week. The amount of time spent by this staff on the Preschool, Families and Community Project Nutrition Education will be 50% of the time.

**Nutrition Educator Assistant: Amor Gamarra-Gross**

The full-time equivalent of this position is based on a 35-hour work week. The amount of time spent by this staff on the Preschool, Families and Community Project Nutrition Education will be 45% of the time.

## Salary & Fringe 2020

**Project Title: Connecticut Department of Public Health – Preschool, Families, and Community Project**

### DIRECT PROGRAM STAFF – Fiscal Year 2020

#### (a) Program Salaries

<u>Position/Name</u>	<u>Annual Salary</u>	<u>No. of Persons</u>	<u>% funded in this contract (FTE)</u>	<u>Salary</u>
Program Coordinator: Idamaris Rodriguez	\$68,115	1	1.00	\$ 68,115
Nutrition Consultant: Jennifer Vinci	\$65,510	1	0.50	\$ 32,755
Nutrition Educator: TBD	\$56,567	1	0.50	\$ 28,284
Nutrition Ed Assistant: Amor Gamarra-Gross	\$45,982	1	0.45	\$ 20,692
<b>Total program Salary amount from section (a)</b>				<b>\$149,846</b>

#### b) Program Fringe Benefits

<u>Position/Name</u>	<u>Fringe %</u>	<u>Total Fringe</u>
Program Coordinator: Idamaris Rodriguez	110.37%	\$ 75,179
Nutrition Consultant: Jennifer Vinci	106.86%	\$ 35,002
Nutrition Educator: TBD	94.54%	\$ 26,740
Nutrition Ed Assistant: Amor Gamarra-Gross	71.93%	\$ 14,884
<b>Total Fringe amount combined from section (b)</b>		<b>\$ 151,805</b>

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**Total Program Salary (total amount from section (a) & (b) combined) \$ 301,651**

#### c) Breakdown of Fringe Benefits

As instructed by DPH management in Fiscal Memorandum No. 19-01, we are using the actual fringe rate for each employee. The breakdown of fringe benefits for each employee is as follow:

	Program Coordinator: Idamaris Rodriguez	Nutrition Consultant: Jennifer Vinci	Nutrition Educator: TBD	Nutrition Educator Assistant: Amor Gamarra-Gross
50410 Life Insurance	0.20%	0.23%	0.10%	0%
50420 Medical Insurance	38.79%	35.22%	22.26%	0%
50430 Unemployment Compensation	0.22%	0.21%	0.23%	0.22%
50441 FICA	5.56%	5.59%	6.20%	6.01%
50442 Medicare	1.30%	1.31%	1.45%	1.40%
50471 Regular Employee Retirement	64.30%	64.30%	64.30%	64.30%
<b>Total Fringe Benefit Rate</b>	<b>110.37%</b>	<b>106.86%</b>	<b>94.54%</b>	<b>71.93%</b>

## Information & Budget by Project 2020

### Template 4: SNAP-Ed Budget Information by Project

#### Section A. Budget Summary for Sub-Grantee

##### ***Contracts/Grants/Agreements for nutrition education services:***

###### ***Name of sub-grantee:***

Connecticut Department of Public Health – Preschool, Families and Community Project

###### ***Total Federal funding, grant:***

\$703,263 for FY 2020

###### ***Description of services and/or products:***

The Connecticut Department of Public Health (DPH) Preschool, Families, and Community Project provides multi-level nutrition improvement intervention strategies that reach SNAP participants, low-income individuals eligible to receive SNAP benefits, and other means-tested federal assistance programs, as well as individuals residing in communities with a significant low-income population (preschool children ages 3 – 5 and families). In addition, these strategies reach SNAP participants adults (18 years of age and older including adults 60+).

The Preschool Children and their Families Project Component provides nutrition education activities in Head Start (HS), School Readiness (SR), and Early Childhood Education (ECE) Programs in school districts with >50% of children who receive free and reduced-cost meals through the Child and Adult Care Food Program, and with >50% of the census tract population who are ≤185% of the federal poverty level.

Nutrition education and train-the-trainer education sessions are conducted for HS, SR, and Early Childhood preschool teachers, who then apply strategies to promote healthy eating behaviors while teaching children important nutrition concepts. Incorporating nutrition activities including family engagement activities into their lesson plans provide an environment where healthy eating behaviors are valued and taught.

Nutrition education sessions and workshops are also provided to preschoolers' families in English and Spanish. Each of the nutrition education sessions and workshops contains a variety of hands-on activities to reinforce learning and allow participants to apply the newly learned information.

The Adults/Families Project Component provides nutrition education and obesity reduction activities for SNAP participants adults at WIC offices, CHC offices, and Community Partner locations; Department of Social Services (DSS) /SNAP office, Community Action Agencies, Emergency Food Assistance Sites (including mobile food pantries), Commodity Supplemental Food Program sites, and Farmers' Markets.

For Policy, System, and Environmental (PSE) Change interventions, DPH is conducting the Nutrition and Physical Activity Self-Assessment for Child Care (NAP SACC) program that targets ECE sites to ensure policies and practices help preschool children (3-5 years old) establish healthy habits for life. DPH is also conducting a Coordinated Approach to Child Health (CATCH) Early Childhood Program, which is an obesity prevention intervention designed to increase physical activity and promote healthy eating in children ages 3-5. DPH is also conducting Breastfeeding-Friendly Child Care Recognition (BFCCR) program to increase breastfeeding duration rates, community breastfeeding support, and compliance with state and federal lactation accommodation law in ECE sites.

DPH, in collaboration with the University of Saint Joseph, coordinates and conducts all direct nutrition education activities with collaborative partners; conducts PSE change interventions; manages nutrition education statewide delivery; monitors and evaluates all activities; completes all mandated SNAP-Ed reporting; and, manages DPH Memorandum of Agreement with DSS.

***Cost of specific services and/or products:***

The total cost of the project is \$703,263 and the cost of specific services is detailed below for FY 2020.

**Section B. Project Costs**

**Federal Fiscal Year: FY 2020**

**State: Connecticut**

**Sub-grantee Name: Connecticut Department of Public Health – Preschool, Families, and Community Project**

Expenses	Unobligated Balances (Carry-over) from Previous FY	Current FY Budget	Non-Federal Support
Salary/Benefits		\$301,651	
Contracts/Sub-Grants/Agreements		\$319,000	
Non-Capital Equipment/ Office Supplies		\$1,886	
Nutrition Education Materials		\$19,535	
Travel		\$1,253	
Building/Space Lease or Rental		\$0	
Cost of Publicly-Owned Building Space		\$0	
Maintenance and Repair		\$0	
Institutional Memberships and Subscriptions		\$0	
Equipment and Other Capital Expenditures		\$0	
Total Direct Costs		\$643,325	
Indirect Costs (Indirect Cost Rate= _40%_)		\$59,938	
Total Federal Funds		\$703,263	
<b>Total Federal Funds Including Unobligated Balance from Previous FY</b>		\$703,263	
Estimated Unobligated Balance from Current FY to Next FY, if any			

Signature of Responsible Official: \_\_\_\_\_

Date: \_\_\_\_\_

**Budget narrative:**

**FY 2020**

**Salary/Benefits: \$301,651 (\$149,846 – salaries/\$151,805 – fringe benefits)**

Position	FTE	Salary	Fringe Benefits (Rate)	Total
Program Coordinator	1.00	\$68,115	\$75,179 (110.37%)	\$143,294
Nutrition Consultant	0.50	\$32,755	\$35,002 (106.86%)	\$67,757
Nutrition Educator	0.50	\$28,284	\$26,740 (94.54%)	\$55,024
Nutrition Educator Assistant	0.45	\$20,692	\$14,884 (71.93%)	\$35,576

**Contracts/Sub-Grants/Agreements: \$319,000**

\$302,000 – University of Saint Joseph, School of Health and Natural Sciences

**FY2020 Budget Narrative**

Description of services: Provide statewide nutrition education for SNAP participants (preschool children and families) at Head Start, School Readiness and Early Childhood programs; recruit Head Start, School Readiness, and Early Childhood programs to participate in the Coordinated Approach To Child Health (CATCH) program; conduct train-the-trainer presentations/workshops to Head Start, School Readiness, and Early Childhood preschool teachers; conduct nutrition education sessions and workshops to SNAP participants parents; conduct nutrition education sessions and workshops with a food demonstration component to SNAP participants adults at WIC offices, CHC offices, and Community Partner locations; Department of Social Services (DSS) /SNAP office, Community Action Agencies, Emergency Food Assistance Sites (including mobile food pantries), Commodity Supplemental Food Program sites, and Farmers' Markets; deliver individualized health coaching by telephone for SNAP-Ed participants; orientate and train nutrition paraprofessionals to ensure delivery of high-quality nutrition education; plan and coordinate the direct and indirect nutrition education schedule to maximize



efforts, prevent duplication, and guarantee effective delivery of direct and indirect nutrition education; oversee nutrition paraprofessionals in the field; collect and aggregate evaluation data collected at all nutrition workshops and nutrition education session; conduct process and outcome evaluation of the project; collaborates with multiple organizations/site in a community to promote core nutrition messages and “speak with one voice” to address broader environmental changes that make it easier for SNAP participants to make healthy food choices; work with organizations to influence changing their policies to incorporate healthy eating and physical activity sessions and workshops into their client’s lives.

Expenses	Unobligated Balances (Carry-over) from Previous FY	Current FY Budget	Non-Federal Support
Salary/Benefits		\$229,089	
Contracts/Sub-Grants/Agreements		\$0	
Non-Capital Equipment/Office Supplies		\$1,800	
Nutrition Education Materials		\$10,581	
Travel		\$28,172	
Building/Space Lease or Rental		\$0	
Cost of Publicly-Owned Building Space		\$0	
Maintenance and Repair		\$0	
Institutional Memberships and Subscriptions		\$0	
Equipment and Other Capital Expenditures		\$0	
Total Direct Costs		\$269,642	
Indirect Costs (Indirect Cost Rate= 12%)		\$32,358	
Total Federal Funds		\$302,000	
<b>Total Federal Funds Including</b>			

**Unobligated Balance from Previous FY**

Estimated Unobligated Balance from Current FY to Next FY, if any



**Salary/Benefits: \$229,089 (\$196,596 – salaries/\$32,493 – fringe benefits)**

Position	FTE	Salary	Fringe Benefits (Rate)	Total
Grant Director	0.3559	\$38,003	\$ 6,388 (16.81%)	\$44,391
Grant Manager	1.0	\$41,184	\$3,295 (8%)	\$44,479
Program Coordinator	0.9115	\$50,206	\$12,551 (25%)	\$62,757
Nutrition Educators	1.0	\$38,480	\$3,078 (8%)	\$41,558
Administrative Coordinator	0.9115	\$28,723	\$7,181 (25%)	\$35,904

**Contracts/Sub-Grants/Agreements: Not applicable**

**Non-Capital Equipment/Office Supplies: \$1,800**

Small equipment and office supplies for project implementation.

Itemized Costs:

\$ 1,300 Office Supplies

\$ 500 Small equipment (< \$5,000)

Justification: Small equipment to support nutrition education workshops (i.e., cutting boards, can openers, etc.). The equipment is needed to conduct education and promote behavior change.

***Nutrition Education Materials: \$10,581***

For the purchase of materials to conduct nutrition education: ESBA program curricula, handouts, recipes, food and supplies for food tasting and demonstrations, and program teaching aids.

***Travel: \$28,172***

Travel estimated at 48,573 miles for SNAP-Ed Program staff to conduct nutrition education at a variety of sites and to attend meetings throughout the state.

***Building/space lease or rental: Not applicable***

***Cost of publicly-owned building space: Not applicable***

***Maintenance and repair: Not applicable***

***Institutional memberships and subscriptions: Not applicable***

***Equipment and other capital expenditures: Not applicable***

***Total direct costs: \$269,642***

***Total indirect costs: \$32,358 (12% of direct costs)***

***Total: \$302,000***

\$17,000 – ARC Safety Group Inc.: Warehouse/Fulfillment

Description of services: Fulfillment (assembly) and storage of nutrition education materials including *The Adventure of Captain 5 A Day* and *Coordinated Approach to Child Health (CATCH)* curriculum; ship and/or deliver nutrition education materials to preschool locations where nutrition education workshops and activities are conducted; ship and/or deliver nutrition education materials to CT DPH and/or approved partner organizations; print nutrition education materials (newsletters, recipe cards, and handouts) for dissemination; maintain inventory, usage reports, and database of customers.

**Non-capital equipment/office supplies: \$1,886**

Purchase office supplies, SAS license and training.

Itemized Costs:

\$ 786 Office Supplies

\$ 800 SAS license (1 license)

Justification: This SAS License is required for use of statistical analysis and database management for evaluation and reporting. The license will be purchased as part of a combined multi-users license for the Connecticut Department of Public Health.

\$ 300 Training

Justification: In-service trainings for staff to learn new skills (e.g., database development, reporting writing, and webpage creation).

**Nutrition Education Materials: \$19,535**

Purchase preschool nutrition education materials (brochures, flyers, and recipe cards), nutrition classroom resources (books/materials/games), nutrition education incentive items with printed SNAP-Ed information such as reusable shopping bag, and teaching aides/materials.

Itemized Costs:

\$ 12,000 Preschool Nutrition Education Materials (Brochures, Flyers, Signage, Recipe Cards) and Classroom Resources (Books, Materials, Games)

\$ 6,735 Nutrition Education Incentive Items (1,347 items @ \$5.00 each)

\$ 800 Teaching Aides/Materials

***Travel: \$1,253 (see justification on Section C)***

***Building/space lease or rental: Not applicable***

***Cost of publicly-owned building space: Not applicable***

***Maintenance and repair: Not applicable***

***Institutional memberships and subscriptions: Not applicable***

***Equipment and other capital expenditures: Not applicable***

***Total direct costs: \$643,325***

***Total indirect costs: \$59,938 (40% indirect rate applied to DPH Salaries only)***

***Total Federal funds: \$703,263***

***Estimated unobligated balances (carry-over) from current FY to next FY, if any:***  
DPH SNAP-Ed program will expend all FY 2020 funds thus no funds will be return.

***Total Federal funds including unobligated balance from previous FY:***  
\$703,263

## Section C. Travel

### ***In-State Travel***

#### ***Travel Purpose:***

Connecticut Department of Public Health – Preschool, Families, and Community Project delivers high quality nutrition education to SNAP participants. Travel is required to deliver nutrition education programs; audit nutrition education program delivered by contractors; attend meetings to plan activities for effective delivery and evaluation of nutrition education; and attend meetings with collaborative partners to garner support for nutrition education to SNAP participants

#### ***Travel destination (city, town or county or indicate local travel):***

For conducting nutrition education program activities and evaluation, in-state travel to Head Start, School Readiness and Early Childhood locations statewide (Bridgeport, Hartford, New Haven and Waterbury as well as Bristol, Danbury, East Hartford, Meriden, New Britain, Norwalk, Norwich, Stamford, West Haven, Torrington, and Willimantic; WIC main offices (Bridgeport, Bristol, Danbury, East Hartford, Hartford, Meriden, New Haven, Stamford, New London, Torrington, Waterbury, and Windham) and the 33 satellites throughout the state; Community Health Center offices (Bridgeport, Bristol, Hartford, Meriden, Middletown, New Britain, New Haven, Norwalk, Norwich, Stamford, Torrington and Waterbury); Department of Social Services (DSS) SNAP office in Norwich and Willimantic; as well as Community Action Agencies, Emergency Food Assistance Sites (including mobile food pantries), Commodity Supplemental Food Program sites, and Farmers' Markets.

#### ***Number of staff traveling:***

3 staff members

#### ***Cost of travel for this purpose:***

\$1,253 (12 trips/month x 12 months x 15 miles/trip x \$0.58/mile)

***Total In-State Travel Cost: \$1,253***

### ***Out-of-State Travel***

#### ***Travel Purpose:***

Not Applicable. No out-of-state travel is planned.

#### ***Travel destination (city and State):***

Not Applicable

#### ***Number of staff traveling:***

Not Applicable

***Cost of travel for this purpose:***

Not Applicable

***Total Out-of-State Travel Cost: \$0***

Section B. Project Costs

Federal Fiscal Year: FY 2020

State: Connecticut

Sub-grantee Name: Connecticut Department of Public Health – Preschool, Families, and Community Project

Expenses	Unobligated Balances (Carry-over) from Previous FY	Current FY Budget	Non-Federal Support
Salary/Benefits		\$301,651	
Contracts/Sub-Grants/Agreements		\$319,000	
Non-Capital Equipment/ Office Supplies		\$1,886	
Nutrition Education Materials		\$19,535	
Travel		\$1,253	
Building/Space Lease or Rental		\$0	
Cost of Publicly-Owned Building Space		\$0	
Maintenance and Repair		\$0	
Institutional Memberships and Subscriptions		\$0	
Equipment and Other Capital Expenditures		\$0	
Total Direct Costs		\$643,325	
Indirect Costs (Indirect Cost Rate= 40% )		\$59,938	
Total Federal Funds		\$703,263	
Total Federal Funds Including Unobligated Balance from Previous FY		\$703,263	
Estimated Unobligated Balance from Current FY to Next FY, if any			

Signature of Responsible Official:



Date: 2/24/19



## Project 2- Food Security

## Template 2: SNAP-Ed State Goals, Objectives, Projects, Campaigns, Evaluation, and Collaboration

### Reporting Progress on State-Level Goals and Objectives

Food Security is utilizing an online system for collection of EARS data, and we are also planning to utilize Excel for collection and assessment of data regarding reach and survey data, in order to assess the impact of programs on knowledge, behaviors and self-efficacy.

### Description of Project/Interventions

#### CT SNAP-Ed UConn Food Security Project

##### *Related State Objective(s):*

Goal 1: Increase healthy food choices among population groups who are receiving or eligible to receive SNAP benefits.

SNAP-Ed participants will demonstrate increased knowledge about making healthy food choices in accordance with the Dietary Guidelines for Americans 2015 including one or more of the following:

- Increase reported fruit and vegetable consumption by at least one-half portion,
- Demonstrate increased knowledge and skills about selecting healthy foods through one of the following activities: label reading, identification of healthy food choices from an array of foods.
- Demonstrate increased knowledge and skills about preparing healthy foods by at least one of the following activities: ability to read and follow directions on a recipe, ability to describe how to properly clean and store fresh produce, demonstration of newly acquired cooking skills and substituting healthier ingredients in recipes.

Goal 2: Increase physical activity among population groups who are receiving or eligible to receive SNAP benefits.

- Demonstrate ability to do simple stretching and other physical activities as appropriate
- Demonstrate increased knowledge of the importance of increasing physical activity and decreasing sedentary activities

Goal 3: Support comprehensive, multi-level interventions and community and public health approaches to shape and facilitate healthy food and physical activity choices among those receiving or eligible to receive SNAP benefits.

- Project will support coordinated systems planning and will integrate program activities into at least one additional neighborhood, municipality, agency, or statewide health promotion initiative.

- Project will develop and execute a coordinated program with at least one additional federally funded program (e.g. Commodity Foods, Child Nutrition Programs, **Farmers' Market** and retail incentive programs, WIC, CDC, EFNEP)

- Provide training on the development and delivery of culturally appropriate, evidence-based food, nutrition, and physical activity education to at least two additional provider groups (e.g. Area Agency on Aging resource coordinators, early childcare staff, teachers, shelter or soup kitchen staff, emergency food providers).

***Audience:***

The primary target audience is participants in emergency food programs and federal food assistance programs, or those involved with community agencies who receive food from Connecticut's two food banks.

Audience will be primarily adults with children, heads-of-households or older adults facing food insecurity. After school or summer programs with youth from SNAP-eligible families will also be conducted.

People who receive food from food banks and food pantries or who are shelter residents or clients of soup kitchens are all very low income and potentially eligible to receive SNAP benefits if not already receiving SNAP. We also work in low income communities where over half of the children receive free or reduce-priced school meals, and in senior housing for low-income older adults.

CT SNAP-Ed: Food Security Project will conduct programming in the following communities: Bridgeport, Danbury, Hartford, Manchester, New London, Norwich, Torrington, Windham and surrounding towns as appropriate. Coordination with other SNAP-Ed projects will ensure that we do not duplicate the services they are providing in the state.

***Food and Activity Environments:***

Each workshop and local intervention will be tailored to the community being served, based on cultural appropriateness, feedback from participants, partners and key informants, and the environment/access to resources. Whenever possible for local interventions, we will align education and recipes to the foods offered at the farmers' market or mobile food pantry. All lessons and educational materials will align with the Dietary Guidelines and MyPlate.

Promoting physical activity is part of the SNAP-Ed educational messaging. When appropriate, SNAP-Ed educators discuss local options for physical activity, as well as ways individuals can be more physically active at home and at work. Some SNAP-Ed programs work with community and school gardens, offering opportunities for physical activity as well as access to healthy food.

Many of our programs are held at food pantries or food distribution sites, where participants can access healthy foods and beverages. We also work at farmers' markets and promote the use of SNAP benefits at farmers' markets. Several of our farmers' markets participate in the "double up" program where people can double the value of their SNAP benefits.

***Project Description:***

The Food Security Project is a state-based intervention that reaches out to the local level. The project runs year- round. Nutrition and food safety education is provided to SNAP recipients and people who receive food from emergency food programs and/or participate in other federal food assistance programs. Workshops are usually 20-90 minutes in duration; programs during food delivery at emergency food sites usually last 1 to 2 hours.

- Face-to-face programs that reinforce, but are not duplicative of WIC, EFNEP or other CT SNAP-Ed efforts. Target groups are women with children, low income heads of households and older adults. School children and seniors will be a smaller target audience. These programs are broken down into two subcategories:
  - Food and Health for Families, Adults and Children: The lessons provided in these class series will follow MyPlate and Dietary Guidelines, with the curriculum chosen based on the needs of the population and the amount of time allotted for the classes. MyPlate for My Family is a curriculum often utilized, providing evidence-based lessons based on the Dietary Guidelines, tailored both English- and Spanish-speaking families with children. The lessons provide practical guidance for increasing physical activity, shopping on a budget and food preparation. Educators also use

Families Eating Smart and Moving More, an Expanded Food and Nutrition Education Program curriculum from North Carolina State University. This curriculum provides varied options for interactive lessons, focusing on nutrition, physical activity, shopping on a budget and food safety. There are 21 lessons from which to choose **in the Families Eating Smart and Moving More Curriculum from North Carolina State**, and every lesson includes hands-on parts of class for food preparation and short physical activity breaks. There are also options for each lesson to be adjusted between 30-90 minutes in length, based on the audience. This is very helpful, as the amount of time provided for lessons varies, and every group moves at a different pace, so this flexible format is very amenable to SNAP-Ed.

- Nutrition for Older Adults: Workshops will focus on improving food security and health and nutrition status of older adults. Eat Smart, Live Strong is a curriculum used for many of these group sessions. The lessons are tailored to adults 60-74 years of age, and emphasize increasing fruit and vegetable intake and participating in 30 minutes of exercise or more each week. Goal setting, active participation with simple exercises, and easy shopping and cooking tips all help to increase self-efficacy for participants. Lessons are short enough that they can be completed in 45 minutes, but options for adding physical activity can lengthen classes and increase the interactive nature of the class. In order to provide additional options for greater interaction, staff have begun using the new Seniors Eating Well curriculum, which is aligned with the 2015-2020 Dietary Guidelines. This curriculum provides a variety of recipes, along with activities to prepare and taste the recipes. The lessons focus on a format in which discussion is encouraged, allowing greater adaptability to participants' everyday life.
- Local interventions will be at individual emergency food sites, shelters, soup kitchens, farmers' markets (where people can use SNAP benefits and WIC vouchers), mobile food pantries, day care, Head Start, housing sites, grocery stores and community centers. Projected number of programs based on previous year's data is estimated to be **175** reaching approximately **1300** participants who attend workshops (Some will be in a series, so contact numbers will be greater) and over **12,500** who attend events such as farmers' markets and health fairs.
  - The focus of nutrition education for farmers' markets and health fairs will be to provide simple guidance to improve nutrition security and dietary intake. MyPlate education materials from [www.choosemyplate.gov](http://www.choosemyplate.gov) will be provided, as well as recipes for healthy eating on a budget. When

possible, recipes will be aligned with the foods offered at the sites, and prepared at farmers' markets using the foods that are for sale that day. Recipes will be from various sources, including English and Spanish recipes from SNAP-Ed Recipe Finder, SNAP4CT and Cooking with EFNEP.

### **Key messages**

- Follow MyPlate and U.S. Dietary Guidelines recommendations for better health, including healthy eating and active living.
- Make half your plate fruits and vegetables, half your grains whole and switch to fat-free or low fat milk and milk products.
- Plan and prepare balanced meals and snacks with foods available from food pantries.
- Use SNAP benefits to “fill in the gaps” with more varied and nutritious foods.
- Eat more fruits and vegetables.
- Follow food safety guidelines to avoid foodborne illness.
- Use food shopping skills, such as label reading, to choose healthy foods while on a limited budget.
- Understand portion sizes
- Enjoy more physical activity

We do not anticipate changing the project methods or strategies at this time, continuing to reach SNAP eligibles in many areas of Connecticut, with a focus on Eastern and Western Connecticut low-income communities where such programs have not been available in the past. We will plan to incorporate experiential learning for undergraduates in the Nutritional Sciences Department for mobile food pantries. Students will conduct education for promotion of healthy eating, as well as PSE interventions, including paper maps and Google maps with parks, trails and open spaces where people can be active, lists of farmers' markets and locations to obtain healthy foods, and resources for signing up for SNAP, WIC and other important programs. When possible, students will also conduct short direct education. Students will be trained by PI and staff to conduct this direct education and PSE work. This alteration will provide more time for educators to provide direct education to SNAP eligibles, while providing valuable experience for students.

**Evidence Base:**

Practice-based -- Using a small group and/or individual contact educational model, such as EFNEP, with the curricula we plan to use in our classes, has shown over 90% of participants improve food choices or food behaviors, with an increase in fruit and vegetable intake of about 0.5 cup/day. Additionally, over 80% of participants improve food resource management practices, resulting in improved food security, and over 75% of adults improve physical activity practices, based on data submitted annually to USDA.

**Key Performance Indicators (KPIs):**

Number of workshop series delivered during implementation; numbers of participants reached; number of partnerships/collaborations

SNAP-Ed participants will demonstrate increased knowledge about making healthy food choices in accordance with the Dietary Guidelines for Americans 2015. Special attention will be placed on using foods commonly available at emergency food programs with suggestions for using SNAP benefits to purchase nutritious foods to enhance the quality of meals and snacks.

Indicators: Acceptance of foods during food tasting (affective), ability to prepare foods during hands-on workshops (behavioral), use of recipes and food tips (behavioral), ability to plan meals and snacks following MyPlate education (cognitive and behavioral).

Measurement of outcome: Numbers of participants and contacts. Informal feedback documented by staff reports, observation of food preparation and food safety skills, 24-hour dietary recall and/or pre/post survey analysis of sample of participants, documentation of intent to make positive changes or reporting of making changes. We will utilize the Fruit and Vegetable Inventory to assess readiness and capacity, as well as 1-2 questions based on the Stages of Change (Transtheoretical) Model, as described by Kim et al.<sup>1</sup> We will also utilize the updated EFNEP Food and Physical Activity Questionnaire for a subset of participants, as this tool has been validated and questions target behaviors aligned with the Dietary Guidelines, as well as the Share our Strength Cooking Matters for Adults Survey.

2. SNAP recipients, eligibles and people receiving emergency foods will improve food management knowledge and skills so they can stretch their SNAP benefits and food dollars, and rely less on emergency foods to meet nutritional needs.

Indicators: Demonstration of increased knowledge and skills through one or more of the following: label reading, identification of healthy food choices from an array of foods, ability to read and follow directions on a recipe, ability to describe how to properly clean and store fresh produce, demonstration of newly acquired cooking skills and substituting healthier ingredients in recipes, pre/post survey of sample of participants. **We will utilize the Share our Strength Cooking Matters for Adults Survey as well as the EFNEP Food and Physical Activity Questionnaire to assess these outcomes.**

Measurement of outcome: Numbers of participants and contacts. Informal feedback documented by staff reports, observation of food preparation, food management and shopping skills, food safety surveys, documentation of intent to make positive changes or reporting of making changes.

3. Support comprehensive, multi-level interventions and community and public health approaches to shape and facilitate healthy food and physical activity choices among those receiving or eligible to receive SNAP benefits.

Indicators: SNAP-Ed staff involvement in food policy groups, community agencies and coalitions will enhance nutrition education efforts in targeted communities.

Measurement of Outcome: Numbers of program activities integrated with neighborhood, municipality, agency, or statewide health promotion initiative. Narrative reports by community-based SNAP-Ed educators. Number of coordinated programs with federally funded programs. Number of trainings offered to providers.

***Use of Existing Educational Materials:***

Give the title, author, and description of existing educational materials that will be used in the delivery of the project/intervention. Specify the language(s) in which the materials will be used including English. Indicate whether the materials will be purchased and justify the need and cost.

From USDA:

- MyPlate materials (English and Spanish) ([www.choosemyplate.gov](http://www.choosemyplate.gov))
- SNAP-Ed Recipe Finder (English and Spanish when available)



- Healthy Eating on a Budget
- “MyPlate for My Family” materials (English and Spanish)
- “Eat Smart, Live Strong” materials (English and Spanish)
- “Fight Bac!” materials

Recipes for Healthy Kids & Teen Nutrition as appropriate

- [www.foodsafety.gov](http://www.foodsafety.gov)

From Other States:

- Iowa State Food and Nutrition Calendar (English and Spanish)-- purchased
- Iowa State “Spend Smart, Eat Smart” materials (English)
- Colorado & California – Eating Smart, Being Active (English and Spanish)
- Families Eating Smart and Moving More and Cooking with EFNEP Cookbook (English and Spanish)-North Carolina State University
- English/Spanish Pictorial Recipes – Oregon State University
- Seniors Eating Well- Pennsylvania State University (English)

Connecticut Resources:

- Farm Fresh, CT Grown recipes (English and Spanish)
- SNAP4CT ([www.snap4ct.org](http://www.snap4ct.org)) (English and Spanish)
- Recipes and lesson plans already developed

Other:

- Cooking Matters educational materials

***Development of New Educational Materials:***

We do not plan to develop any major, new nutrition education materials. We will revise materials from other sources to meet participants’ limitations of food access, income, skills, cooking equipment, literacy, as well as the culture and language of our participants. Our recipes include menu ideas for balanced meals, so we will provide as needed. We may develop recipes for food items available in season/commodity foods

as needed. New materials may be developed specifically for the food pantry and homeless shelter population if the existing materials are not effective in delivering nutrition messages due to literacy level, cultural sensitivity or other issues. All new materials will be sent to the SNAP Agency (CT Department of Social Services) for approval before being used in programming.

## Evaluation Plans

### **Name:**

Food and Health for Families, Adults and Children and Nutrition for Older Adults

### **Type:**

Outcome evaluation

### **Questions:**

We will use surveys that address knowledge of nutrition, physical activity and food resource management, as well as intent to change/willingness to change dietary and physical activity behaviors.

### **Approach(es):**

We are planning several methods of evaluation to address these questions. As discussed above, will utilize the Fruit and Vegetable Inventory, the Share our Strength Cooking Matters for Adults Survey, EFNEP Food and Physical Activity Questionnaire, for a subset of participants. These surveys all address dietary changes, and the EFNEP survey also assesses food resource management, physical activity and food safety. Each lesson in the Seniors Eating Well Curriculum includes a short evaluation, including questions regarding knowledge and intent to change/behavioral questions. We will use these evaluations when using this curriculum with seniors. Additionally, we will use the validated survey for 3<sup>rd</sup> to 5<sup>th</sup> graders from EFNEP when working with children in this age range. This survey includes 14 questions assessing intake of fruits, vegetables, sugar sweetened beverages, as well as questions related to physical activity, screen time and food safety.

### **Planned use:**

We will use these results to adjust class content and approach in order to increase effectiveness and identify strengths and weaknesses. Additionally, we will share this data with partners, stakeholders and participants to convey the benefits of the program.

**Prior Evaluation:**

N/A

**Use of SNAP-Ed Evaluation Framework:** Identify the Evaluation Framework indicators that are used.

**Coordination of Efforts**

The SNAP-Ed Food Security Project will coordinate with other CT SNAP-Ed partners in an effort to provide the most appropriate programming to various audiences in targeted communities. We will interact regularly with other programs via email and will check We will also coordinate with the EFNEP program, CT FoodCorps, and UConn Extension to avoid duplication and work with state or local food policy councils to assist in meeting their nutrition education efforts.

The CT SNAP-Ed Food Security Project will provide civil rights training in coordination with CT Department of Social Services to insure compliance. Currently, all materials used in our programs include an address and phone number where individuals can make a civil rights complaint to USDA office of Civil Rights.

**References**

1. Kim K, Reicks M, Sjoberg S. Applying the theory of planned behavior to predict dairy product consumption by older adults. J Nutr Educ Behav. 2003;35:294-301.

## Template 3: SNAP-Ed Staffing Plan

Staffing 2020

Project Name: UConn Food Security

Position Title Attach statement of work listing SNAP-Ed related job duties for each position	FTEs charged to SNAP-Ed Attach definition of FTE and basis for calculations	Percentage of SNAP-Ed Time Spent on Management/ Administrative Duties	Percentage of SNAP-Ed Time Spent on SNAP-Ed delivery. Include all approaches described in Guidance Section 1	SNAP-Ed Salary, Benefits, and Wages Federal dollars only
<b>Community Nutrition Educator (Assistant Extension Educator)</b>	0.30 FTE (30% of total time on SNAP-Ed)	10%: Submitting EARS reports, time and effort, accounting for travel, attending meetings	90%: Delivery of nutrition education programs, cooking demonstrations, meeting with site contacts	\$18,343 salary \$10,272 benefits \$28,615 total
<b>Community Nutrition Educator (Public Service Specialist)</b>	0.48572 FTE (100% of total time on SNAP-Ed)	10%: Submitting EARS reports, time and effort, accounting for travel, attending meetings	90%: Delivery of nutrition education programs, cooking demonstrations, meeting with site contacts	\$30,940 salary \$8,880 benefits \$39,820 total

<b>Community Nutrition Educator (Public Service Specialist)</b>	0.14011 FTE (100% of total time on SNAP-Ed)	10%: Submitting EARS reports, time and effort, accounting for travel, attending meetings	90%: Delivery of nutrition education programs, cooking demonstrations, meeting with site contacts	\$7,650 salary \$2,196 benefits \$9,846 total
			Total Staffing Budget: Enter total for all salary, benefits, and wages from Federal dollars here.	\$56,933 salary \$21,348 benefits \$78,281 total

## Snap Ed related job duties 2020

**Community Nutrition Educator (Assistant Extension Educator):** (0.30 FTE at fringe rate 56%) responsible for delivery of nutrition education programs, cooking demonstrations, meeting with site contacts, submitting EARS reports, time and effort, accounting for travel and attending meetings.

**Community Nutrition Educator (Public Service Specialist):** (0.48572 FTE at fringe rate 28.7%) responsible for delivery of nutrition education programs, cooking demonstrations, meeting with site contacts, submitting EARS reports, time and effort, accounting for travel and attending meetings.

**Community Nutrition Educator (Public Service Specialist):** (0.14011 FTE at fringe rate 28.7%) responsible for delivery of nutrition education programs, cooking demonstrations, meeting with site contacts, submitting EARS reports, time and effort, accounting for travel and attending meetings.

**FTE Basis:** Full time equivalent is based on 35 hours per week for 52 weeks, or 1820 hours.

## Salary & Fringe 2020

### DIRECT PROGRAM STAFF – Fiscal Year 2020

#### (a) Program Salaries

<u>Position/Name</u>	<u>Annual Salary</u>	<u>No. of Persons</u>	<u>FTE</u>	<u>Salary</u>
Comm Nutr Edu/Heather Peracchio	\$61,142	1	30%	\$18,343
Comm Nutr Edu/Krissy Anderson	\$60,940	1	.48572%	\$30,940
Comm Nutr Edu/Diane Schuler	\$54,600	1	.14011%	\$7,650

**Total Program Salary amount from section (a)  
\$56,933**

#### b) Program Fringe

<u>Position/Name</u>	<u>Fringe %</u>	<u>Total Fringe</u>
Comm Nutr Edu/Heather Peracchio	56%	\$10,272
Comm Nutr Edu/Krissy Anderson	28.7%	\$8,880
Comm Nutr Edu/Diane Schuler	28.7%	\$2,196

**Total Program Fringe amount combined from section (b)  
\$21,348**

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**Total Program Salary and Fringe (amount from section (a) & (b) combined)  
\$78,281**

## Information & Budget by Project 2020

### Section A. Budget Summary for Sub-Grantee

#### ***Contracts/Grants/Agreements for nutrition education services:***

##### ***Name of sub-grantee:***

University of Connecticut, College of Agriculture, Health and Natural Resources  
CT SNAP-Ed Food Security Project

##### ***Total Federal funding, grant:***

\$111,065

##### ***Description of services and/or products:***

The Food Security Project is a state-based intervention that reaches out to the local level. The project runs year round. Nutrition and food safety education is provided to SNAP recipients and people who receive food from emergency food programs and/or participate in other federal food assistance programs. Workshops are usually 20-90 minutes in duration, with key messages that encourage healthy eating and physical activity based on the USDA MyPlate. Three community-based nutrition educators will provide programs in Bridgeport, Danbury, Manchester, New London, Norwich, Torrington and Windham, including:

- Face-to-face programs that reinforce, but are not duplicative of WIC, EFNEP or other CT SNAP-Ed efforts. Target groups are women with children and low income heads of households.
- Local interventions will be at individual emergency food sites, shelters, soup kitchens, farmers' markets (where people can use SNAP benefits and WIC vouchers), mobile food pantries, day care, Head Start, housing sites, grocery stores and community centers. School children and seniors will be a smaller target audience.

Projected number of programs based on previous year's data is estimated to be 175 reaching 1,300 participants who attend workshops (Some will be in a series, so contact numbers will be greater) and approximately 12,500 who attend events such as farmers' markets and health fairs. We expect to have a slight increase in indirect education, as we plan to mentor Nutritional Sciences undergraduates involved in Independent Study. The PI and staff will train students and oversee indirect **intervention** they provide in the community as an opportunity for experiential learning. **Student will conduct education for promotion of healthy eating, as well as PSE interventions, including paper maps and Google maps with parks, trails and open spaces where people can be active, lists of farmers' markets and locations to obtain healthy foods, and resources for signing up for SNAP, WIC and other important programs. When possible, students will also conduct**



short direct education. Students will be trained by PI and staff to conduct this direct education and PSE work.

This adjustment will hopefully free up our educators to provide more direct education, increasing the number of participants reached through lessons.

***Cost of specific services and/or products:***

Salary = \$56,933

3 part time community educators who will implement local SNAP-Ed programming. See job description for community nutrition educators, which will apply to all community-based staff.

Fringe for staff = \$21,348

1 part time community educator (56.0% fringe)

2 part time special payroll community educators (28.7% fringe)

Total Salary and Benefits = \$78,281

Sub-Contract to Interfaith AIDS Ministry of Greater Danbury = \$5,750\*

(See separate Template 4A, Sub-grantee, for this sub-contractor)

Non-capital equipment and supplies - \$900

To cover costs of materials for educational workshops including food demonstration supplies such as plastic and paper goods, handouts, food prep supplies (\$200), food for demonstrations (\$700).

Materials = \$336

To cover cost of purchasing educational nutrition calendars, other educational materials, and copying charges.

Travel = \$2,880

For 3 part time educators and the PI for direct delivery of nutrition education programming, to meet with community partners, to market programs, to provide technical assistance and foster coordination and collaboration. To attend staff meetings and in-state meetings and conferences as appropriate.

In-state travel: 135 miles at 0.58 per mile = \$78.30 for 12 months = \$939.60 x 3 staff =

\$2,818.80, plus \$61.20 for PI annual in-state travel of 105.5 miles.

Total Direct Costs = \$88,147

Indirect costs - \$22,918

Total = \$111,065

#### **Template 4: SNAP-Ed Budget Information by Project**

University of Connecticut SNAP-Ed Food Security Project

Sub-Contract Budget information

##### **Section A. Budget Summary for Sub-Grantee**

###### ***Contracts/Grants/Agreements for nutrition education services:***

###### ***Name of sub-grantee:***

Interfaith AIDS Ministry of Greater Danbury, Inc.

###### ***Total Federal funding, grant:***

\$5,750.00

###### ***Description of services and/or products:***

The Interfaith AIDS Ministry of Danbury, Food Pantry, has worked with SNAP-Ed for several years to provide nutrition education services of a Dietitian to clients of the Food Pantry and Project recipients in Danbury.

The dietitian will develop and provide nutrition education programs for the clients and staff of the contractor, including bi-weekly food demonstrations, monthly lunch time programs and individualized education with nutritional assistance in food selection and dietary guidance to Pantry participants.

###### ***Cost of specific services and/or products:***

\$5,750.00 to cover 285 hours of the Dietitian's time.

**Section B. Project Costs**

**Federal Fiscal Year: 2020**

**State: Connecticut**

**Sub-grantee Name: UConn Food Security**

Expenses	Unobligated Balances (Carry-over) from Previous FY	Current FY Budget	Non-Federal Support
Salary/Benefits		\$78,281	
Contracts/Sub-Grants/Agreements		\$5,750	
Non-Capital Equipment/ Office Supplies		\$900	
Nutrition Education Materials		\$336	
Travel		\$2,880	
Building/Space Lease or Rental			
Cost of Publicly-Owned Building Space			
Maintenance and Repair			
Institutional Memberships and Subscriptions			
Equipment and Other Capital Expenditures			
Total Direct Costs		\$88,147	
Indirect Costs (Indirect Cost Rate= <u>26%</u> )		\$22,918	
Total Federal Funds		\$111,065	Leave blank
<b>Total Federal Funds Including Unobligated Balance from Previous FY</b>	Leave Blank		Leave Blank
Estimated Unobligated Balance from Current FY to Next FY, if any	Leave blank		

Signature of Responsible Official: \_\_\_\_\_

Date: \_\_\_\_\_

**Budget narrative:**

**Salary/Benefits:**

Salary = \$56,933: Three part time community educators who will implement local SNAP-Ed programming. See job description for community nutrition educators, which will apply to all community-based staff. Fringe for staff = \$21,348 part time community

educator (56.0% fringe), 2 part time special payroll community educators (28.7% fringe)  
Total Salary and Benefits = \$78,281

**Contracts/Sub-Grants/Agreements:** Retain copies of agreements on site.

Inter-faith AIDS Ministry of greater Danbury = \$5,750

Salary: \$5,750

Materials: N/A

Travel: N/A

Building Space: N/A

Utilities and Insurance: N/A

**Non-capital equipment/office supplies:**

\$900: To cover costs of supplies for educational workshops including food demonstration supplies such as plastic and paper goods, handouts, food prep supplies (\$200), food for demonstrations (\$700)

**Nutrition Education Materials:**

\$336: To cover cost of purchasing educational nutrition calendars and other educational materials, copying charges for copying handouts.

**Travel:**

Travel = \$2,880

For 3 part time educators and the PI for direct delivery of nutrition education programming, to meet with community partners, to market programs, to provide technical assistance and foster coordination and collaboration. To attend staff meetings and in-state meetings and conferences as appropriate.

In-state travel: 135 miles at 0.58 per mile = \$78.30 for 12 months = \$939.60 x 3 staff = \$2,818.80, plus \$61.20 for PI annual in-state travel of 105.5 miles.

**Building/space lease or rental: N/A**

***Cost of publicly-owned building space: N/A***

***Maintenance and repair: N/A***

***Institutional memberships and subscriptions: N/A***

***Equipment and other capital expenditures: N/A***

***Total direct costs: \$88,147***

***Total indirect costs:***

The total indirect cost of \$22,918 is the amount of direct funds (\$88,147) multiplied by the indirect cost rate of 26%.

***Total Federal funds: \$111,065***

***Estimated unobligated balances (carry-over) from current FY to next FY, if any:***  
N/A

## **Section C. Travel**

### ***In-State Travel***

#### ***Travel Purpose:***

Travel will include direct delivery of nutrition education programs, as well as travel for meetings with community partners to schedule programs, promote programs, provide technical assistance and foster coordination and collaboration. Travel will include attending staff meetings and in-state meetings and conferences as appropriate. Delivery of nutrition education programs requires traveling to community-based sites.

#### ***Travel destination (city, town or county or indicate local travel):***

Local food pantries, homeless shelters, community agencies throughout Connecticut, program staff offices for meetings. Will cover a wide area throughout the state. Staff are located in Extension offices in Fairfield, New London and Windham counties.

#### ***Number of staff traveling:***

3 Nutrition Educators and one Project Director

***Cost of travel for this purpose: \$2,880***

Travel = \$2,880

For 3 part time educators and the PI for direct delivery of nutrition education programming, to meet with community partners, to market programs, to provide technical assistance and foster coordination and collaboration. To attend staff meetings and in-state meetings and conferences as appropriate.

In-state travel: 135 miles at 0.58 per mile = \$78.30 for 12 months = \$939.60 x 3 staff = \$2,818.80, plus \$61.20 for PI annual in-state travel of 105.5 miles.

***Total In-State Travel Cost: \$2,880***

***Out-of-State Travel: N/A***

**Template 4: SNAP-Ed Budget Information by Project**

**Section B. Project Costs**

**Federal Fiscal Year: 2020**

**State: Connecticut**

**Sub-grantee Name: UConn Food Security**

Expenses	Unobligated Balances (Carry-over) from Previous FY	Current FY Budget	Non-Federal Support
Salary/Benefits		\$78,281	
Contracts/Sub-Grants/Agreements		\$5,750	
Non-Capital Equipment/ Office Supplies		\$900	
Nutrition Education Materials		\$336	
Travel		\$2,880	
Building/Space Lease or Rental			
Cost of Publicly-Owned Building Space			
Maintenance and Repair			
Institutional Memberships and Subscriptions			
Equipment and Other Capital Expenditures			
Total Direct Costs		\$88,147	
Indirect Costs (Indirect Cost Rate= _____)		\$22,918	
Total Federal Funds		\$111,065	Leave blank
Total Federal Funds Including Unobligated Balance from Previous FY	Leave Blank		Leave Blank
Estimated Unobligated Balance from Current FY to Next FY, if any	Leave blank		

Signature of Responsible Official: *Paul Regan*

Date: 7/25/19

# Project 3 - Hispanic Health Council School and Family-Based SNAP-Ed



## Template 2: SNAP-Ed State Goals, Objectives, Projects, Campaigns, Evaluation, and Collaboration

### Reporting Progress on State-Level Goals and Objectives

All data collected by the Hispanic Health Council are entered into secure electronic databases either Access, Excel or EARS data collection program developed by UCONN Health. All raw data is exported to SPSS statistical software for analysis and reports. The program does not collect personal identifiers when collecting participant's information.

The Hispanic Health Council's Finance Department oversees and monitors all SNAP-Ed program budgets and expenses. All finance transactions are kept in a secure electronic financial database.

### Description of projects/interventions:

#### **Project/Intervention Title:**

Hispanic Health Council SNAP-Ed Program (HHC-SNAP-Ed)

#### **Related State Objective(s):**

The Hispanic Health Council program supports the Connecticut SNAP-Ed State Plan

#### **Audience:**

The HHC SNAP-Ed program targets low-income SNAP recipients or likely eligible participants living in seven towns with a high number of SNAP participants (Hartford, New Haven, Waterbury, Bridgeport, New Britain, Norwich, and New London). The program also provides services at other towns that have a good number of SNAP participants, such as Meriden, East Hartford, West Haven, Hamden, and Bristol but not on a regular basis. The main seven towns that are targeted have a diverse population and high levels of poverty (table 1). HHC-SNAP-Ed program follows a lifespan approach by providing nutrition and exercise education services to pregnant and post-partum women and their infants, preschool and school age children, adolescents, adults and older adults. The program focuses on reaching low-income families with children and low-income minority populations, mostly those that only speak Spanish.

	Population	Race %	Median Household	Poverty %
Hartford	122,587	Black: 37.9	\$33,841	30.5

<sup>108</sup> Information updated using Population Census Estimates, July 1, 2018 by town. Available at: <https://www.census.gov/quickfacts/fact/table/US/PST045218>

		Hispanic:44.3 White not Hispanic:14.8		
New Haven	130,418	Black: 33.0 Hispanic:30.4 White not Hispanic:30.3	\$39,191	25.6
Waterbury	108,093	Black: 19.6 Hispanic:37.2 White not Hispanic:38.5	\$40,879	24.3
Bridgeport	144,900	Black: 35.3 Hispanic:39.2 White not Hispanic:21.4	\$44,841	20.8
New Britain	72,453	Black: 12.4 Hispanic:40.9 White not Hispanic:42.3	\$43,611	22.7
Norwich	39,136	Black: 11.3 Hispanic:14.4 White not Hispanic:61.9	\$53,682	14.6
New London	26,939	Black: 15.8 Hispanic:33.1 White not Hispanic:45.2	\$37,331	28.3

***Food and Activity Environments:***

The HHC-SNAP-Ed Program provides culturally appropriated nutrition and exercise education through activities that are specially tailored to participants’ age, literacy levels, cultural heritage, and food budget. These educational activities are aimed to increase participants’ awareness, knowledge and skills to facilitate adoption of better eating and exercise habits. In addition, program staff actively participates on community coalitions, and committees, working with partners in improving access, within the target communities, to healthy food and places to be physically active.

***Project Description:***

The HHC SNAP-Ed Program utilizes a comprehensive life course approach to improve the nutrition and physical activity levels of SNAP recipients. The program’s nutrition and exercise education efforts uses a mix of direct and indirect methodologies to deliver education to its target population. HHC SNAP-Ed direct education services are provided through group and individual sessions, which include engagement activities aimed to increase participant’s knowledge and skills necessary to adopt better eating and activity behaviors. These activities are designed with the intensity necessary to reinforce the educational messages based on the latest 2015 USDA Dietary Guidelines,

My Plate food guide and CDC 2008 physical activity recommendations. All services are available in English and Spanish. During the new fiscal year cycle (2019-2020), the HHC-SNAP-Ed will continue to enhance the services currently offered as follows: a) through the incorporation of vegetable tasting activities as part of all direct services; b) increasing its reach to parents of children receiving direct services by inviting them to enroll into a one month e-texting nutrition and exercise messaging and visit our Facebook page containing nutrition information; c) It will also implement the recently added nutrition puppet show , and a jeopardy game about healthy drinks and food label.

The timeline for these enhanced services was that in FY 2018-2019: 1) planning and incorporation of food tasting and e-texting into direct services in Hartford and New Haven was conducted, and 2) the new puppet show script and jeopardy game was completed. Thus, FY 2019-2020, full implementation of these enhancement activities will occur. In FY 2021, the program will evaluate the impact of these activities on the overall services.

In addition, throughout the three years (2019-2021), the HHC-SNAP-Ed program is planning the following new initiatives: 1) social media campaign targeting the increase of fiber rich food intake; and 2) integrating the American Heart Association resources “Healthy for Life” in our nutrition education services.

In FY 2018-2019, formative research was conducted for the social media campaign; in FY 2020, implementation and diffusion of the social media campaign will take place, and in 2021, the full evaluation of the social media campaign exposure and impact will be conducted.

The HHC-SNAP-Ed program will also continue to work in local and state coalitions working towards improving food security and the prevention of childhood obesity.

### **Nutrition and Exercise Education for Children:**

- 1) Puppet Shows: The program offers nutrition education for children from preschool to 3rd grade using a series of seven interactive puppet shows each of which has follow-up classroom activities, as well as nutrition education information for parents of children attending presentations. These presentations cover the following topics: a) eating healthy by using My Plate; b) preventing of chronic diseases by eating healthy and exercising; c) eating plenty of fresh fruits and vegetables; d) eating well, drinking water and exercising every day; and d) avoiding foodborne illness by following the 4 steps to keep foods safe from bacteria. Puppet shows last between 30 to 40 minutes, each has pre/post questions based on presentation’s topic, a song summarizing the main messages and visuals aids are used to reinforce

- messages. This school year the program will implement a new puppet show promoting healthy drinks and beverages such as water and unflavored low-fat milk. It will also expand e-texting activities to parents of children from all towns receiving direct services. In the delivery of these services, the program works in partnership with Early Childhood Centers (ECC), public schools, public libraries, city recreational services, and with many community agencies serving low-income populations.
- 2) Jeopardy Games: this activity is for children from 4th grade and up with follow-up classroom activities for teachers, as well as nutrition education for parents of children attending these presentations. The main topics of the two-jeopardy games are: My Plate and Food Safety. During FY 2020, the program will deliver a 3rd jeopardy game about the nutrition facts and the importance of drinking water. In the delivery of these services, the program works in partnership with public schools, after school programs for low-income youth, summer feeding programs, and park and recreation services.
  - 3) Media-Smart-Youth: Eat, Think and Be Active! is an interactive afterschool/summer camp program for young people ages 11 to 13. It helps them to develop critical thinking skills that will aid them in making better food choices while increasing their physical activity habits by analyzing the complex media world around them, which influences their health, nutrition and physical activity. It consists of 10- 90 minutes lessons. Each includes a healthy snack preparation and tasting and a physical activity break. Children work in teams on a project specific to developing healthy eating and exercise promoting messages for their peers. Our main partners for the delivery of these activities are public schools and youth focused community agencies.

#### **Nutrition and Exercise Education Activities for Adults:**

- 4) Group presentations for parents. It's a series of nutrition and exercise workshops aimed at increasing knowledge and abilities to facilitate the adoption of healthier nutrition and physical activity behaviors. The program will use the *Eating Smart/Being Active* curriculum to conduct group education to parents. This curriculum is evidence based, it consists of 9 lessons lasting from 90 to 120 minutes. Topics covered include: eating healthy, food preparation skills development, physical activity, and food resource management. This option will be offered to parents attending groups which will usually meet at schools and other community places since it consist on 9 sessions. A series of group nutrition education activities from the "Eating Smart Being Active" curricula series will include cooking demonstration or food tasting activities, as well as educative materials and handouts from the same curricula will be distributed to participants to reinforce the healthy

**nutrition and physical activities messages.** The program will also use its own practice tested curricula consisting of 4 sessions about the following topics 1) healthy eating on a limited budget; 2) smart food choices using the food label; 3) food portion control and being active to achieve health/weight control; 4) healthy meal preparation with food safety. Each lesson last 60 minutes and are offered as a single presentation or as part of a series. Our main partners are HHC Maternal and Child Programs (MCP), and other MCP within the community, parent's liaisons, and resource centers from public schools, city's offices, community agencies, and community clinics. All nutrition education group activities include a food tasting activity or a cooking demonstration.

5) Nutrition Education Activities for Older Adults.

Group presentations and Individual education is provided to older adults at senior centers, senior housing and places of distribution for CFCP program for seniors. The evidence-based curricula **that is being used is "Eat Smart Live Strong" curricula with older adults available at:**

**<https://snaped.fns.usda.gov/library/materials/eat-smart-live-strong-nutrition-education-older-adults>**

6) Healthy for Life Educational Experiences and Know your Number Campaign.

The Hispanic Health Council **was chosen** as a Healthy for Life Educational Site by the American Heart Association (AHA). Thus, **HHC will continue to partner with the American Heart Association using materials from the Healthy for Life Campaign.** HHC-SNAP-Ed series of four nutrition education sessions and incorporating material from AHA curricula such as videos and recipes on the delivery of these presentations. Each presentation is offered as a series of 4 two hours workshops, which include videos and activities taken from the Healthy Life Experiences curricula available in English and Spanish at:

[http://www.heart.org/HEARTORG/HealthyLiving/HealthyEating/Nutrition/Healthy-For-Life-Resources\\_UCM\\_491278\\_Article.jsp#.W0YZ7NL0mUI](http://www.heart.org/HEARTORG/HealthyLiving/HealthyEating/Nutrition/Healthy-For-Life-Resources_UCM_491278_Article.jsp#.W0YZ7NL0mUI). The evidence-based intervention curriculum that is being used is Eating Smart/Being Active curricula. In addition, the HHC-SNAP-Ed program educates on reducing sodium and saturated fat intake and increasing fresh fruits and vegetables in the diet. At these sessions, AHA complements the services by providing licensed nurses which take participants' blood pressure and provide education them on the AHA Know your Numbers campaign, [http://www.heart.org/HEARTORG/Conditions/HighBloodPressure/KnowYourNumbers/Understanding-Blood-Pressure-Readings\\_UCM\\_301764\\_Article.jsp#.W033-NL0mUk](http://www.heart.org/HEARTORG/Conditions/HighBloodPressure/KnowYourNumbers/Understanding-Blood-Pressure-Readings_UCM_301764_Article.jsp#.W033-NL0mUk).

AHA also provides educational materials about blood pressure readings at these group sessions.

### **Nutrition and Exercise Education for Adults with a PSE Initiative**

The program also conducts direct education connected to a PSE initiative through the following projects:

- 7) HHC Maternal and Child Program (MCP). MCP staff is trained by the HHC-SNAP-Ed program nutritionist to educate their clients about good nutrition and being active. The HHC-SNAP-ED program uses the *Eating Smart/Being Active* curriculum which has three individual maternal and infant lessons. The topics of the lessons are: eating smart during pregnancy, feeding your baby and feeding your baby solid foods. This program complements this information about planning healthy meals with My Plate, making healthy choices at the supermarket, food safety during pregnancy. A total of 6 in-training, one-hour sessions are provided to staff working on these programs. **During FY 2020, staff will continue to be trained on teaching mothers to practice responding feeding,** which is feeding the child nutritious food by following their child's hunger and satiety cues. HHC-MC staff will educate clients for ½ hour on each of these nutrition topics at client's homes, and at their offices. **HHC-MCH program staff provides support to pregnant women and mothers with small children to access food assistance programs.** They also work with a network of community agencies and clinics, and food banks in the area to make referrals or receive referrals for needed services. **Thus, HHC-SNAP-Ed program and HHC-MCH programs work together in improving the food security of low income mothers and their children.**
  
- 8) The Hartford Mobile Market (HMM) was the result of formative research conducted by the HHC and a University partner, as a way to increase access to fresh produce among residents of low-income Hartford neighborhoods. **This fresh produce mobile vendor provides services among low-income neighborhood in Hartford.** It is available year-round and program staff conduct direct nutrition education services at the several mobile stops that include a WIC office, Community Health Centers, and low-income housing. The HHC-SNAP-Ed program staff conducts vegetable tasting activities at market sites during the summer and early fall. Individual education provided are 20 minutes with 5-10 minutes to answer question/comments. **It also reinforces educational messages and promotes its usage through e-texting nutrition education.** The Hartford Food System runs the market's daily operations and the HHC-SNAP program maintains communication with them in the delivery of nutrition education and exercise services.

9) The Holcomb Farm project.

Hispanic Health Council is a member of a Community Supported Agriculture farm, known as Holcomb Farm located in Granby CT. This farm offers memberships to community organizations in Hartford that provide services to low-income clients, which result in weekly vegetable shares delivered at the agency from June through the end of the season. The HHC-SNAP-Ed program provides weekly nutrition education with recipes, accompanied several times during the season with vegetable tasting activities. Participants receive a weekly share of the vegetables. This activity increases access to fresh produce, providing ideas for its preparation, storage and nutritional benefits. In other words, it brings the farm to the city. The lessons are chosen from My Plate for My Family <https://snaped.fns.usda.gov/snap/MPMF/EducatorsHandbook.pdf>, and Eating Smart/Being active curricula, adapting both to individual education. Vegetable cooking demonstrations are conducted using recipes developed by the program and the University of Connecticut Extension –College of Agriculture.

**Indirect Education**

HHC-SNAP-Ed direct nutrition education activities are complemented by indirect education delivered through the following channels: media presentations conducted at local Spanish Radio and TV; distribution of nutrition and exercise information to parents at schools; and through nutrition and exercise e-texting messages to adult participants of HHC SNAP-Ed direct education activities who wish to receive it.

10) Social Marketing Campaign

On FY 2020, the program will implement a bilingual social marketing campaign promoting a higher intake of foods that are good sources of fiber among low income populations. We will use a combination of bilingual hand-outs, e-texting and social media such as Facebook to deliver its message targeting SNAP recipients. The messages and frequency chosen for this campaign will be the result of formative research conducted on FY 2019.

11) Participation in Initiatives, Committees and Coalitions

The program will continue to participate on obesity prevention initiatives at the regional, state and local levels aimed to implement social and environmental changes within the communities to facilitate the adoption of healthy lifestyle behaviors. These initiatives include:

- Get Healthy CT Coalition from New Haven County
- Get Healthy CT Coalition from Bridgeport and Fairfield area.
- Hartford Childhood Wellness Alliance,
- Hartford Food Policy Commission,
- Connecticut Network Food System Alliance,
- End Hunger Connecticut! Board of Directors
- New Haven Wellness Committee
- Fruit and Vegetable Hartford Food Policy Subcommittee
- Healthy Kids Policy group

It is important to highlight that recently a program staff co-chaired a national panel of experts that developed important infant feeding guidelines for infant and young toddlers using a responsive feeding guidelines<sup>109</sup>. The panel was organized by Healthy Eating Research, a national program of the Robert Wood Johnson Foundation. Program staff also participated in a panel helping to develop infant feeding messages for Puerto Rican mothers.

### **Key Messages**

Each project component delivers one or more of the following key messages:

- Make half your plate fruits and vegetables.
- Eat a variety of fresh fruits and vegetables daily.
- Make half of your daily grain choices whole grains.
- Choose fat-free or low-fat dairy products.
- Keep meat and poultry portions small and lean.
- Balance caloric intake from food and beverages with calories expended.
- Choose nutrient-dense foods.
- Read Food Labels.

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<sup>109</sup> Pérez-Escamilla R, Segura-Pérez S, Lott M, on behalf of the RWJF HER Expert Panel on Best Practices for Promoting Healthy Nutrition, Feeding Patterns, and Weight Status for Infants and Toddlers from Birth to 24 Months. Feeding Guidelines for Infants and Young Toddlers: A Responsive Parenting Approach. Durham, NC: Healthy Eating Research, 2017. Available at <http://healthyeatingresearch.org>



- Be physically active every day as part of a healthy lifestyle.
- Reduce screen time.
- Safely handle, prepare and store food.
- Breastfeed exclusively for the first six months of life, and for at least one year, with the gradual introduction of solid foods during the second six months of life.
- Eat nutrient-rich foods in extra amounts during pregnancy/breastfeeding/infancy.

Intervention	Intervention Type	Locations	Duration and Frequency	Total # of participants
<p><b>1. Nutrition and Exercise Puppet Shows (PS)</b></p> <p>Targets: preschool, kindergarten, first through 3rd grade children, and their parents.</p>	<p>-Direct group education, interactive PS with follow-up classroom activities and educational materials for parents.</p>	<p>-Early Childhood Centers (ECC). -Public Schools.  -After School Programs.  -Summer Camps.  - Community agencies and events.</p>	<p>30-45 minutes duration  Series of 4- 7 PS at ECC/Public Schools, or  2-3 at Summer camps or community events</p>	<p>FY 2020/2021  15,500 participants per year. Divided as follows:  Hartford: 3000  NH: 3000  Bridgeport: 3000  Waterbury: 2500  New Britain: 2500  Norwich: 1000  New London: 500</p>
<p><b>2. Nutrition and Exercise Jeopardy Games</b></p> <p>Targets:  School age children (4<sup>th</sup> to 6<sup>th</sup> grade).</p>	<p>-Direct group education with follow-up activities and educational materials for parents.</p>	<p>-Public Schools. -After school programs.  -Summer camps.</p>	<p>-60 minutes duration.  -Series of 3 jeopardy games about My Plate, Food Safety, and Making Healthy food and beverage choices</p>	<p>FY 2020/2021  1700 participants per year Divided as follows:  Hartford: 350  NH: 350  Bridgeport: 350  Waterbury: 300  New Britain: 250  Norwich: 50  New London: 50</p>

<p><b>3. Media-Smart-Youth: Eat, Think and Be Active.</b></p>	<p>Nutrition and physical activity ten group sessions, using the evidence-based “Media-Smart Youth, Eat, Think, and Be Active” curriculum.</p>	<p>-Summer camp 10 weeks</p>	<p>-Ten 90 minutes lessons plus snack recipes sent to parents to prepare it.  -Lessons are delivered in 6 weeks during the summer</p>	<p><b>FY 2020/2021</b>  A total of 30 participants per year.</p>
<p><b>4. Nutrition and exercise presentations for parents</b></p>	<p>The program uses the <i>Eating Smart/Being Active</i> curriculum to conduct group education to parents. This curriculum includes cooking demonstration and physical activity.</p>	<p>-Public Schools. - Community clinics. - Community agencies.</p>	<p>The full curriculum consists of 9 lessons covering, My Plate healthy eating recommendation, resource management and promoting being active.</p>	<p><b>FY 2020/2021</b> 600 participants <b>per year.</b>  Divide as follows:  Hartford: 100  NH: 100  Bridgeport: 100  Waterbury: 100  New Britain: 50  Norwich: 100  New London: 50</p>
<p><b>5. Group presentation for older adults.</b></p>	<p>Group presentations and Individual education at tables with information. <b>The program uses “Eat Smart Live Strong” curricula</b></p>	<p>-Senior centers  -CCFP sites in New Haven and Bridgeport</p>	<p>-60 minutes group sessions with a food tasting activity  -20-30 minutes one</p>	<p><b>FY 2020/2021</b>  -200 group education <b>per year</b> -200 individual education per year</p>

	with older adults		on one education	
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<p><b>6. Healthy for Life Educational Experiences.</b></p>	<p>A series of 4 lesson based on the following topics:</p> <ol style="list-style-type: none"> <li>1. Your Wellbeing</li> <li>2. Cooking skills and easy budget friendly healthy cooking</li> <li>3. Smart grocery shopper</li> <li>4. Gardening and planting seeds for healthy eating</li> </ol>	<p>Hispanic Health Council and Community Partners</p>	<p>90 minutes lessons with video and hand on activity available at: <a href="http://www.heart.org/HEARTORG/HealthyLiving/HealthyEating/Nutrition/Healthy-For-Life-Resources_UCM_491278_Article.jsp#.W1neoNL0mUI">http://www.heart.org/HEARTORG/HealthyLiving/HealthyEating/Nutrition/Healthy-For-Life-Resources_UCM_491278_Article.jsp#.W1neoNL0mUI</a></p>	<p><b>FY 2020/2021</b> Total number of participants 800 individual education <b>per year.</b> <b>25 participants at each group education per year.</b> Hartford (25), New Haven (25) and Bridgeport (25)</p>
<p><b>7. HHC Maternal and Child Programs</b></p>	<p>The program uses <i>Eating Smart/Being Active</i> curriculum to provide one-on-one education. The program also provides a train of trainer for the nutrition and maternal and child program staff.</p>	<p>-HHC Community agency - Participant's homes</p>	<p>This curriculum contains 3 lessons about nutrition during pregnancy and infants' nutrition.</p>	<p><b>FY2020/2021</b> 1000 participants <b>per year.</b> Hartford only</p>
<p><b>8. Holcomb Farm nutrition and exercise education.</b></p>	<p>Individual education with recipes. The HHC is member of a Community</p>	<p>HHC offices</p>	<p>Weekly during 16 weeks from June through the end of</p>	<p><b>FY 2020/2021</b> 600 participants <b>per year.</b></p>

	Supported Agricultural Farm, thus through this initiative we bring the farm to the city.		September.	
<b>9. Hartford Mobile Market (HMM) Nutrition Education</b>	-Individual education with hands on activities	HMM Stop sites -HHC WIC office  -Charter Oak Community Health Center  -CHS Community Health Center  -CCMC Primary Care Center  -Senior Centers and Housing	Activities 4 to 10 activities per/week at different sites. The market runs year round	<b>FY 2020/2021</b> 2500 participants <b>per year.</b>

<p><b>10. Eat Fiber for your Health Social Marketing Campaign</b></p>	<p>Participants from SNAP-Ed activities will be invited to receive e-texting messaging related to this campaign.</p>		<p>Duration of the campaign will be 4 months each year.</p>	<p><b>FY 2020</b></p> <p>Full implementation</p> <p>Reaching 6000 participants with e-texting messaging promoting fiber intake <b>per year.</b></p> <p>Facebook likes and sharing: 6000</p> <p>e-texting 6000</p> <p><b>FY 2021</b></p> <p><b>Campaign evaluation</b></p>
<p><b>11.</b> Participation in committees, coalitions and initiatives.</p>	<p>Participation in local and statewide committees and coalition for the prevention of childhood obesity.</p>			

**Evidence Base:**

The HHC has conducted, with an academic partner, a series of needs assessments indicating that our target low-income audience: a) is highly food insecure, b) under-consumes fruits & vegetables, c) has a high consumption of sodas and sweetened beverages and fast foods and deep fried products, e) is physically sedentary, f) experiences excessive rates of obesity and associated comorbidities, g) practices suboptimal food safety behaviors, h) has limited nutrition and food safety knowledge, self-efficacy, and skills needed to adopt the Dietary Guidelines advice; and (i) experiences dietary risk related to pre-conception and prenatal food insecurity and poor dietary habits<sup>110</sup>. A case-control study was conducted to identify predictors of obesity

<sup>110</sup> . Pérez-Escamilla R., Damio, G, Himmelgreen D, González A, Segura-Pérez S, Bermúdez-Millán A. Translating knowledge into community nutrition programs: Lessons learned from the Connecticut Family

among Puerto Rican children from Hartford, CT. The study included 53 pre-pubertal children, 31 girls and 22 boys, between 7 and 10 y of age. Children were classified as obese [n = 29, body mass index (BMI)  $\geq$  85th percentile] or controls (n = 24, BMI < 85th percentile). Factors associated with obesity were frequency of fruit juice consumption [odds ratio (OR), 95% confidence interval (CI); 4.02, 1.48-10.95], hours of daily TV viewing (1.86, 1.02-3.42), maternal BMI (1.39, 1.10-1.77) and lower dairy product intake (0.41, 0.19-0.93). In addition, obese children were more likely than non-obese children to have higher systolic and diastolic blood pressures. These results showed the multiple factors affecting childhood obesity in this community<sup>111</sup>. Through this partnership, HHC also conducted numerous qualitative and quantitative studies showing The HHC SNAP-Ed Project's pre/post Nutrition Knowledge, Attitudes and Behaviors surveys consistently showed that HHC's SNAP-Ed Project's social marketing campaigns (fruits and vegetables, food safety, breastfeeding) reached at least 75% of the target audience; were easily understood, were liked and found to be useful; improved knowledge and skills; and led to improved behaviors (e.g., increased fruit consumption, improved home food safety practices)<sup>112 113</sup>. The Hispanic Health Council conducted in partnership with the University of Yale focus groups with pregnant low-income Latina women aimed to identify a culturally appropriate intervention to increase fruit and vegetable (F&V) intake among this group. These women also suggested nutrition education sessions and cooking/taste testing demonstrations as important components to improve their eating habits thus teaching participants to prepare healthy, tasty dishes. Many women in these groups favored both group and individual education delivered by community health educators<sup>114</sup>.

HHC conducted an RCT to assess the impact of distribution of incentive coupons along with a texting-based marketing campaign promoting usage of a Mobile Market (MM), on increasing access, purchase, and intake of fruit and vegetables among SNAP-Ed

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Nutrition Program for Infants, Toddlers, and Children. Recent Research Developments in Nutrition 2002; 5:69-9070

<sup>111</sup> Tanasescu M, Ferris AM, Himmelgreen DA, Rodriguez N, Pérez-Escamilla R. [Biobehavioral factors are associated with obesity in Puerto Rican children.](#) J Nutr. 2000 Jul;130(7):1734-42. PubMed PMID: 10867044.

<sup>112</sup> Pérez-Escamilla R, Himmelgreen D, Bonello H, Peng YK, Mengual G, González A, Méndez I, Cruz J, Phillips LM. [Marketing nutrition among urban Latinos: the SALUD! campaign.](#) J Am Diet Assoc. 2000 Jun;100(6):698-701. PubMed PMID: 10863575.

<sup>113</sup> Dharod JM, Perez-Escamilla R, Bermudez-Millan A, Segura-Perez S, Damio G. [Influence of the Fight BAC! food safety campaign on an urban Latino population in Connecticut.](#) J Nutr Educ Behav. 2004 May-Jun;36(3):128-32. PubMed PMID: 15202988.

<sup>114</sup> Hromi-Fiedler A, Chapman D, Segura-Pérez S, Damio G, Clark P, Martinez J, Pérez-Escamilla R. [Barriers and Facilitators to Improve Fruit and Vegetable Intake Among WIC-Eligible Pregnant Latinas: An Application of the Health Action Process Approach Framework.](#) J Nutr Educ Behav. 2016 Jul-Aug;48(7):468-477.e1. doi: 10.1016/j.jneb.2016.04.398. PubMed PMID: 27373861; PubMed Central PMCID: PMC4934128.



participants. The study was known as the NEAT study (Nutrition Education, Access and Texting (NEAT))<sup>115</sup>. The program invited participants of SNAP-Ed “My Plate” educational session and who were Hartford residents with unlimited texting plan and being willing to receive daily text messages for a 4-week period. A total of 193 participants completed baseline and follow-up survey of whom 100 were intervention and 93 from the control group. Both groups had similar socio-demographic characteristics, with a mean age of 32±8.81 years, 79% were Hispanic, mostly female (96%), and receiving SNAP benefits (80%). They also had similar baseline fruit and vegetable shopping and purchasing practices, and consumption. Findings from the follow-up survey (n=169) showed that participants from the intervention group spent significantly more on fruits than those in the control group (\$42 vs. \$30, p=0.027), and a significant higher percentage of participants from the intervention group reported buying at the MM their produce than participants from the control group (46% vs. 23%, p=0.002). There was a significant increase in intake of fruit (p=0.001) in the intervention group but not on the control group. Pre and post test results showed significant improvements in knowledge (59.64±20.29 vs 71.14±21.99) p=0.000 as a result of the nutrition education session. NEAT was successfully implemented and it lead to higher use of MM, more money spent on fruits, and higher intake of produce. Based on this findings the program has implemented to its direct nutrition education for adults e-texting messages delivered to participants that agree to received and have unlimited text messaging.

- Nutrition and Exercise Puppet Shows.

HHC SNAP-Ed program has been delivering a series of six nutrition and exercise puppet shows successfully for many years for children from pre-k to 3rd grade. This activity has been practice-tested by a robust process evaluation method that has collected qualitative and quantitative data from teachers and child care providers, which consistently shows high level teacher’s satisfaction and their assessment of significant knowledge increase as result of these presentations. Through all these years teachers have also provided their observations about the effect of the puppet show on their students through their comments as well. Program’s teacher’s evaluation data from FY 2017 (n=1,739) continues to show high satisfaction levels with these presentation, since 90% of them rated the puppet show as very good to excellent, and 94% of the teachers thought that the knowledge of the students improved a fair amount of a lot. Teachers’ qualitative observation also show this fact as you can read in the following quotes:

10/29/2017“This program should be thought in every primary classroom in CT. It has helped our children become aware of good food, nutritious food and the need for exercise”

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<sup>115</sup> Segura-Perez S., Perez-Escamilla R., Damio G. Improving Access to Fresh Fruit and Vegetables among Inner-City Residents: The NEAT Trial. Abstract Number 313.2 FASEB Journal 1 April 2017

4/15/2016 “I’m so impressed with this program our students are learning so much from this.”

10/14/2016 “Thanks for coming to our school. We focus on good healthy practices and this program connects with our curriculum.”

03/29/2017 “We have loved and learned a lot from these shows. The children love exercising with the puppets. “

Monitoring field observation, n=20 conducted by independent graduate student concluded that based on pre and post questions children remember the main messages taught by previous presentation, and also based on pre-and post-test questions, it was observed that more children provide right answers to post-test questions after each presentations.

- Media-Smart Youth, Eat, Think, and Be Active The HHC will continue to use This NIH based curriculum<sup>116</sup> for their after school programs at MI CASA site in Hartford. Its main objective is to empower youth (11-13 years old) to make healthy food and physical activity choices and to develop a critical thinking in assessing how media may influence their nutrition and lifestyle choices. Based on pre/post test results from 16 children that completed both tests, children participating in Media-Youth, Eat, Think, and Be Active! Program significantly increased their knowledge in nutrition and physical activity (55.1 pre-test vs 64.8 post-test) (p=0.000). They also showed a significant improved attitude toward considering good nutrition as being important to them (p=0.040).
- Jeopardy Games (JG):  
A series of two jeopardy games (My Plate and Exercise, Food Safety) are delivered at schools and after school programs for children from 4th grade and older. My Plate JG teaches children about healthy eating and the importance of being active and Food Safety JG teaches children to follow the four main steps promoted by USDA to keep food safe from bacteria. This activity is also practice tested, a total of 1,410 children were reached with these presentations, and based on 53 JG teacher’s evaluation for this 2017 fiscal year, they showed very

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<sup>116</sup> Eunice Kennedy Shriver National Institute of Child Health and Human Development, NIH, HHS. (2009). Report on the Evaluation of the Media-Smart Youth Curriculum. Retrieved October 12, 2012, from [https://www.nichd.nih.gov/publications/pubs/documents/msy\\_evaluation\\_report\\_final.pdf](https://www.nichd.nih.gov/publications/pubs/documents/msy_evaluation_report_final.pdf) Media-Smart Youth Program Evaluation Fact Sheet. Retrieved October 12, 2012, from <https://www.nichd.nih.gov/publications/pubs/documents>

high levels of satisfaction with this service (95%), teachers also observed positive impacts on their student’s nutrition knowledge after participating on this activity (96%). Quotes from thank you notes from children attending these JG presentations also showed high level of satisfaction among students and positive impact on their knowledge and behaviors, some examples are presented below:

“Thanks for a great presentation about the five food groups, and teach me about facts about the foods that we need to eat more often. I learn that bacon is not that healthy because it’s full of fat.”

“Thank you for showing the class the healthy food choices and we need to eat wheat bread and not white bread, and not a lot sugar.”

“Thanks for coming to our class. I’m most likely going to make better food choices”

“Thank you for teaching me the healthy way to eat. I will apply this and cut back on potato chips! I will drink 6 cups of water, and 60 minutes of exercise daily.”

- Group Presentation for adults. A series of four presentation are offered to parents with children, the topics of these presentations are: 1) Planning your family meals with My Plate, 2) Making healthy food choices at the supermarket, 3) following healthy lifestyles habits to prevent diabetes and other chronic diseases, 4) Food safety. A total of 39 sessions of nutrition workshops were delivered to 900 participants at schools and other community sites. In addition, a total of 17 group education nutrition presentations were delivered to 100 seniors. These presentations are evaluated with pre/post-test to assess change in knowledge and behaviors, in addition satisfaction surveys filled out by participants or contact person. Participants are also asked to set a behavioral goal for them to follow as a result of these presentation. Pre and post-test in a subsample of participants from attending presentations showed significant improvements in knowledge and behaviors (table A) and examples of goal settings that participants wrote after each presentation (table B).

<b>Table A. Results of change in knowledge and behaviors from group presentations for adults</b>		
	Increase in knowledge Paired t-test scores and p value	Behavior change

My Plate n=24	50.07±22 pre-test scores vs 72.22±21.23 post-test p=0.000	Found an increase in the percentage of participants that reported to feel confidence in exercising at least 30 minutes daily (55.2% vs 69.2%). And also an increase of those who reported to feel confident eating the right portion of foods (75% vs 100%).
Food Label n=22	(69.09 pretest mean vs 78.54 post-test mean) p=0.016	Significant Increase on participant's confidence in using food label (p=0.015) after presentation.
Diabetes Prevention n=12	Not significant changes in knowledge were found	Not measured

<b>Table B Participants Behavioral Goals</b>	
Topic of presentations	Participants goals after presentations
My Plate	<p>“Exercise more and eat more vegetables”</p> <p>“Eat more green vegetables and switch to low fat milk”</p>

	“Eat a variety of fruits and vegetables”
Food Label	“Eat less processed foods” “ Read food labels and choose those with less saturated fat” “use less salt” “ always check food labels and choose foods low in sodium and saturated fats” “Eat less canned food”
Diabetes presentation	“Avoid sweets, exercise and go for my annual check-ups” “Exercise regularly and make healthy foods choices” “Drink less soft drinks” “Drink more water”

**Key Performance Indicators (KPIs):**

We use the following instruments for program evaluations:

1) Process evaluation, we use Program Impact Pathways (PIP) for each activity.

Rafael Pérez-Escamilla, Sofia Segura-Pérez, Grace Damio. Applying the Program Impact Pathways (PIP) Evaluation Framework to School-based Healthy Lifestyles Programs: Workshop Evaluation Manual. Food and Nutrition Bulletin, vol. 35, no. 3 © 2014 (supplement) <https://doi.org/10.1177/15648265140353S202>

2) Change in food preferences in children is assessed using a food preference scale with pictures of foods.

Nicklas T, Lopez S, Liu Y, Saab R, Reiher R. Motivational theater to increase consumption of vegetable dishes by preschool children. Int J Behav Nutr Phys Act. 2017 Feb 7;14(1):16. doi: 10.1186/s12966-017-0468-0. PubMed PMID: 28166788; PubMed Central PMCID: PMC5294896

3) Food Behavior Checklist, <https://snaped.fns.usda.gov/materials/food-behavior-checklist>

Table 3 **Performance Indicators**

Activity	Measures/indicators	Method	Core Indicators measured
Puppet Shows	<p>Process evaluation: Total number of participants/contacts at each puppet show</p> <p>Outcome evaluation: Teacher Satisfaction Teacher observation of behavior change Qualitative assessment of change of knowledge.</p>	<ul style="list-style-type: none"> <li>• Satisfaction survey after each event</li> <li>• Comments on satisfaction surveys</li> <li>• Qualitative independent observations of children remembering main messages pre and post presentation.</li> </ul>	<ul style="list-style-type: none"> <li>• Healthy Eating (MT1)</li> <li>• Physical Activity (MT3)</li> </ul>
Jeopardy Games	<p>Process evaluation: Total number of participants/contacts</p> <p>Outcome evaluation: Teacher satisfaction Teacher observation of behavior change Change in knowledge Changes in knowledge and attitudes</p>	<ul style="list-style-type: none"> <li>• Satisfaction survey after each event</li> <li>• Comments on satisfaction surveys</li> <li>• Pre/post testing</li> </ul>	<ul style="list-style-type: none"> <li>• Healthy Eating Behaviors (MT1)</li> <li>• Physical Activity (MT3)</li> </ul>

<p>Adult Education Sessions</p>	<p>Process evaluation: Total number of participants/contacts</p> <p>Outcome evaluation: Change in knowledge Change in self-efficacy for healthy eating and performing physical activity</p>	<ul style="list-style-type: none"> <li>• Pre/post testing</li> <li>• Pre/post self-efficacy scale</li> <li>• Goal setting</li> </ul>	<ul style="list-style-type: none"> <li>• Healthy Eating Behaviors (MT1)</li> <li>• Food Resource (MT2)</li> <li>• Physical Activity (MT3)</li> <li>• Nutrition Support (MT5)</li> </ul>
<p>Maternal &amp; Child Health Programs</p>	<p>Process evaluation: -Total number of participants in the trainings (train of trainer)  (Breastfeeding: Heritage and Pride) - Breastfeeding initiation and duration  Comadrona, MIOP, NFN, DCF – change in knowledge, food intake, self-efficacy</p>	<ul style="list-style-type: none"> <li>• Initiation and duration data documented by program staff</li> <li>• Pre/post testing (only train of trainer activities)</li> </ul>	<ul style="list-style-type: none"> <li>• Healthy Eating Behaviors (MT1)</li> <li>• Food Resource (MT2)</li> <li>• Physical Activity (MT3)</li> <li>Nutrition Support (MT5)</li> </ul>
<p>Media-Youth</p>	<p>Process evaluation: Total number of participants/contacts</p> <p>Outcome evaluation: Change in nutrition and physical activity knowledge, self-efficacy and food</p>	<ul style="list-style-type: none"> <li>• Pre/post testing, food frequency questionnaires, self-efficacy scale</li> <li>• Children satisfaction survey</li> </ul>	<ul style="list-style-type: none"> <li>• Healthy Eating Behaviors (MT1)</li> <li>• Physical Activity (MT3)</li> </ul>

	intake		
Social media campaign	<p>Process evaluation:</p> <p>Total number of likes/shares, received e text messaging and consumer satisfaction with overall campaign assessed by phone.</p>	<ul style="list-style-type: none"> <li>• Pre/post testing, short food frequency of daily vegetables, fruits, legumes and whole grains.</li> <li>• Participant's satisfaction survey</li> </ul>	<ul style="list-style-type: none"> <li>• Healthy Eating Behaviors (MT1)</li> </ul>
E-Texting Not related to the social media campaign.	<p>Process evaluation</p> <p># of messages delivered</p> <p>Outcome evaluation</p> <p>-Level of satisfaction and self-efficacy change after receiving messages.</p>	<ul style="list-style-type: none"> <li>• Satisfaction survey at the end of the texting campaign.</li> </ul>	<ul style="list-style-type: none"> <li>• Healthy Eating Behaviors (MT1)</li> <li>• Food Resource (MT2)</li> <li>• Physical Activity (MT3)</li> </ul>

***Use of Existing Educational Materials:***

**Educational Materials**

<b>Title</b>	<b>Source</b>	<b>Language</b>	<b>Cost</b>	<b>Cost justification</b>
Stickers: Five Food Groups, Food Safety, Exercise,	Positive Promotions	English	\$0.07 each	No-cost substitute available
Have Fun with Fruits and Veg.	Team Nutrition	English	\$0.04/copy	No-cost substitute



				available
Crack the Secret Code	Team Nutrition	English	\$0.04/copy	No-cost substitute available
What Food Am I? Coloring Pgs.	SNAP-Ed Program, HHC	Bilingual	\$0.04/copy	No-cost substitute available
Coloring Pages – My Plate,	USDA	English	\$0.04/copy	No-cost substitute available
Coloring Pages –Happy Heart, Farm to Table, Exercise	HHC	Bilingual	\$0.04/copy	No-cost substitute available
Choose My Plate, 10 Tips	USDA	Bilingual	\$0.04/copy	No-cost substitute available
10 Tips Add More Veggies	USDA	Bilingual	\$0.04/copy	No-cost substitute available
Focus on Fruits 10 Tips	USDA	Bilingual	\$0.04/copy	No-cost substitute available
Come Frutas y Verduras	CDC	Spanish	\$0.04/copy	No-cost substitute available
Thermy Coloring Page	USDA	English	\$0.04/copy	No-cost substitute available
The Amazing Refrigerator	USDA	English	\$0.04/copy	No-cost substitute available
Fight Back Pamphlet	USDA	Bilingual	\$0.06/copy	No-cost substitute

				available
Word Scramble - Whole Grain	USDA	English	\$0.04/copy	No-cost substitute available
Enjoy Exercise! Color Pages	SNAP-Ed Program, HHC	Bilingual	\$0.04/copy	No-cost substitute available
Are you a Fit Kid?	Team Nutrition	English	\$0.04/copy	No-cost substitute available
Tips for Increasing Phys. Act.	USDA	English	\$0.07/copy	No-cost substitute available
How Much Physical Activity	USDA	English	\$0.07/copy	No-cost substitute available
Magnet Hand Washing Guide	USDA	English	\$0.62 each	No-cost substitute available

***Development of New Educational Materials:***

The HHC SNAP-Ed program will be texting the effectiveness of using bilingual postcards with nutrition information for parents of children attending presentations with information to access our website and nutrition Facebook with nutrition information, and to enroll in nutrition texting messaging. The program will also test the effectivity, engagement and satisfaction with the new jeopardy and puppet show about choosing healthy beverages and make healthy food choices by using the food label. Both of which were developed in FY 2019.

No new material will be developed in FY 2020.

**Evaluation Plans**

**Name:**

*Eat Fiber for your Health Social Marketing Campaign*

**Type:** Process and outcome

We are planning conducting process and outcome evaluation of a media campaign to promote higher intake of fiber rich foods. Formative research to develop key messages to be delivered through texting and Facebook in English and Spanish was conducted in FY 2019.

Outcome evaluation: The campaign will collect pre and post data of participants enrolled in the campaign through e-texting to assess its change in knowledge and attitudes as result of participating in the campaign, as well as participant's satisfaction with the campaign.

Process evaluation: We will collect data of Facebook likes and shares and visits to assess coverage of the campaign.

**Questions:**

1. How many people have seen the campaign?
2. What impact this campaign have on their dietary habits?
3. What they like or dislike about the campaign?
4. How much people knows about fiber intake recommendation?
5. How many daily intake of fiber rich foods SNAP-Ed participants are eaten?
6. What are the attitudes and behaviors related fiber rich food.

**Approach(es):**

In FY 2019 recruitment for the formative research was done by bilingual nutrition educators who invited WIC participants, and clients from the Maternal and Child Programs at the Hispanic Health Council to participate in two focus groups to gather input in the development of the campaign. Based on this results messages are being developed.

Participants will be called to assess their baseline intake, purchasing habits, knowledge and attitudes toward foods rich in fiber post-campaign and to know their levels of satisfaction with it. The campaign will last 9 months.

Once the campaign is launched in FY 2020, individuals participating in SNAP-Ed activities will be invited to participate in the e-texting campaign for 30 days and also invited to visit the campaign's Facebook page. The campaign will last 9 months, but participants will be asked to participate in a once per month period. We would collect dietary intake using a short food frequency questionnaire that will be applied before and after the 6 weeks exposed to this campaign and we will also collect information about

customer satisfaction with the campaign. Post campaign information will be collected by conducting a phone survey among participants. We will measure exposure based on the number of like and shares from Facebook among participants. We will measure engagement for the number of comments on Facebook.

***Planned use:***

The results will be used to assess the effectivity of using social media and e-texting on participant's knowledge and behaviors about eating fiber rich foods. It will help the program to incorporate social media as a complementary educational tool to all direct nutrition education efforts.

***Prior Evaluation:*** Formative research for campaign conducted in FY 2019

***Use of SNAP-Ed Evaluation Framework:***

Eat Fiber for your Health will use the ST1, MT2 Healthy Eating indicators and ST2, MT2: Food resources management.

**Coordination of Efforts**

The HHC-SNAP-Ed program works very closely with CT Department of Social Services and the other CT SNAP-Ed programs to coordinate efforts and avoid duplication of services. In addition, the program coordinates its efforts with other local or statewide initiatives, an example of this is the work that we do with End Hunger CT! and other partners supporting their effort promoting the Summer Food Program at targeted towns, and by conducting educational activities at these summer feeding sites. The program also provides the CT DSS phone number for information about the availability of SNAP benefits or other food assistance programs among likely eligible individuals. The Maternal and Child component of the program works very closely with the WIC program in supporting and promoting breastfeeding, and this program also helps clients with their SNAP application. At each town the program partners with public school districts, preschools, senior centers, libraries, churches, hospitals, community health centers, farmer markets, community gardens, and community agencies serving low income clients.

## Template 3: SNAP-Ed Staffing Plan

### Staffing 2020

Provide the following summary by SNAP-Ed project for all paid staff in the budget. Complete a summary for each project. Provide the Full Time Equivalents (FTE), describe staff responsibilities as they relate to SNAP-Ed and note the funding amounts that will be paid by State and/or Federal funds. Add rows as needed.

#### Project Name: Hispanic Health Council, SNAP-Ed Program FFY2019-2020

Position Title Attach statement of work listing SNAP-Ed related job duties for each position	FTEs charged to SNAP-Ed Attach definition of FTE and basis for calculations	Percentage of SNAP-Ed Time Spent on Management/ Administrative Duties	Percentage of SNAP-Ed Time Spent on SNAP-Ed delivery. Include all approaches described in Guidance Section 1	SNAP-Ed Salary, Benefits, and Wages Federal dollars only
Director of Programs	.45 FTE (32 hours/week)	75%	25% Approach 2,3	\$58,392
Associate Director	1.0 FTE (35 hours/week)	50%	50% Approach 2,3	\$89,766
Nutritionist (2 staff)	2.0 FTE (35 hours/week)	0%	100% Approach 1, 2	\$126,195
Group Leader/Nutrition Educator 1253	1.0 FTE (35 hours/week)	0%	100% Approach 1, 2	\$53,453

Position Title Attach statement of work listing SNAP-Ed related job duties for each position	FTEs charged to SNAP-Ed Attach definition of FTE and basis for calculations	Percentage of SNAP-Ed Time Spent on Management/Administrative Duties	Percentage of SNAP-Ed Time Spent on SNAP-Ed delivery. Include all approaches described in Guidance Section 1	SNAP-Ed Salary, Benefits, and Wages Federal dollars only
Nutrition Educator (10 staff)	10.0 FTE (35 hours/week)	0%	100% Approach 1	\$467,037
Infant Feeding Coordinator	.25 FTE (35 hours/week)	0%	100% Approach 1, 2	\$13,100
Prenatal Nutrition Coordinator	.15 FTE (30 hours/week)	0%	100% Approach 1, 2	\$9,634
Prenatal Nutrition Educator	.80 FTE (35 hours/week)	0%	100% Approach 1	\$48,488
Program Assistant	1.0 FTE (35 hours/week)	100%	0% Approach 2	\$57,281
			Total Staffing Budget: Enter total for all salary, benefits, and wages from Federal dollars here.	\$923,346

## Snap Ed related job duties 2020

### **Staffing Hispanic Health Council – SNAP-Ed Program**

Statement of Work listing SNAP-Ed related job duties for each position:

#### **Director of Programs:**

Responsible for grant coordination, partner relationships. Programmatic oversight including budget monitoring and contractual reporting.

#### **Associate Director:**

Responsible for program development and service delivery; network oversight and coordination of statewide relationships and coordination of activities. Personnel management including, coordination of staff trainings and evaluations. Data collection and reporting oversight. Active member of national and statewide nutrition and food committees and policy groups.

#### **Nutritionist:**

Responsible for weekly scheduling of nutrition education activities, conduct staff trainings and in-service trainings for other agencies, conduct community nutrition presentations among target populations. Participates on local and school based committees working on the prevention of childhood obesity and increasing food security.

#### **Group Leader/Nutrition Educator:**

Assist with staff supervision, delivers nutrition activities, and conduct outreach with school staff, preschool programs and community agencies to schedule presentations. Monitor on-site daily programming.

#### **Nutrition Educator:**

Conduct nutrition education activities, and community events; disseminate nutrition education materials. Collect data and enter data on database.

#### **Program Assistant:**

Provides general administrative support. Processes supplies requests, prepares expenses reports, etc. Assist with data entry, and in the production of reports.

#### **Infant Feeding Coordinator:**

Coordinates nutrition education of peer counselors. Educates and promotes proper infant nutrition to client one-one and in community settings.

#### **Prenatal Nutrition Coordinator:**

Supervises daily activities of prenatal nutrition educators, and coordinates nutrition education activities with nutritionists.

**Prenatal Nutrition Educator:**

Direct delivery of nutrition education activities to pregnant women. Collect and maintain data, and enter data in database.

Definition of FTE and basis for calculations:

**Director of Programs:**

The full-time equivalent of this position is based on a 32-hour work week. The amount of time spent by this staff on the HHC SNAP-Ed program will be 45% of the time.

**Associate Director:**

The full-time equivalent of this position is based on a 35-hour work week. The amount of time spent by this staff on the HHC SNAP-Ed program will be 100% of the time.

**Nutritionist:**

The full-time equivalent of this position is based on a 35-hour work week. The amount of time spent by this staff on the HHC SNAP-Ed program will be 100% of the time.

**Group Leader/Nutrition Educator:**

The full-time equivalent of this position is based on a 35-hour work week. The amount of time spent by this staff on the HHC SNAP-Ed program will be 100% of the time.

**Nutrition Educator:**

The full-time equivalent of this position is based on a 35-hour work week. The amount of time spent by this staff on the HHC SNAP-Ed program will be 100% of the time.

**Program Assistant:**

The full-time equivalent of this position is based on a 35-hour work week. The amount of time spent by this staff on the HHC SNAP-Ed program will be 100% of the time.

**Infant Feeding Coordinator:**

The full-time equivalent of this position is based on a 35-hour work week. The amount of time spent by this staff on the HHC SNAP-Ed program will be 25% of the time.

**Prenatal Nutrition Coordinator:**

The full-time equivalent of this position is based on a 30-hour work week. The amount of time spent by this staff on the HHC SNAP-Ed program will be 15% of the time.

**Prenatal Nutrition Educator:**

The full-time equivalent of this position is based on a 35-hour work week. The amount of time spent by this staff on the HHC SNAP-Ed program will be 80% of the time.



# Salary & Fringe 2020

Project Title: Hispanic Health Council, Inc. SNAP-Ed Program

## DIRECT PROGRAM STAFF - Fiscal Year 2019 - 2020

### a. Program Salaries

Position/Name	Annual Salary	No. of Persons	% funded in this contract (FTE)	Salary
Program Director -Leticia Marulanda	\$ 99,054.00	1	45%	\$ 44,574.00
Associate Director -Sofia Segura-Perez	\$ 68,524.00	1	100%	\$ 68,524.00
Nutritionist -Gilma Galdamez	\$ 54,351.00	1	100%	\$ 54,351.00
Nutritionist -Ana Ferreras	\$ 41,981.00	1	100%	\$ 41,981.00
Group Leader/Nutrition Educator - Maria Arroyo	\$ 40,804.00	1	100%	\$ 40,804.00
Nutrition Educator - Paula Agudelo	\$ 36,746.00	1	100%	\$ 36,746.00
Nutrition Educator - Josefa Correa	\$ 37,009.00	1	100%	\$ 37,009.00
Nutrition Educator – Alfred Feliciano	\$ 33,296.00	1	100%	\$ 33,296.00
Nutrition Educator - Ruth Gonzalez	\$ 39,806.00	1	100%	\$ 39,806.00
Nutrition Educator -Alexis Hidalgo	\$ 36,294.00	1	100%	\$ 36,294.00
Nutrition Educator – Xaimar Cruz	\$ 32,000.00	1	100%	\$ 32,000.00
Nutrition Educator - Lusero Rodriguez	\$ 33,961.00	1	100%	\$ 33,961.00
Nutrition Educator - Surelys Ramos Flores	\$ 32,643.00	1	100%	\$ 32,643.00
Nutrition Educator - Migdalia Texidor-Huertas	\$ 40,119.00	1	100%	\$ 40,119.00
Nutrition Educator - Jessenia Turcios	\$ 34,643.00	1	100%	\$ 34,643.00
Program Assistant - Teresita Marquez	\$ 43,726.00	1	100%	\$ 43,726.00
Infant Feeding Coordinator - Bethany Salguero	\$ 40,000.00	1	25%	\$ 10,000.00
Prenatal Nutrition Coordinator-Iris Nieves Cross	\$ 49,025.00	1	15%	\$ 7,354.00
Prenatal Nutrition Educator- Maria Serrano	\$ 46,268.00	1	80%	\$ 37,014.00
<b>Total Program Salaries from section (a)</b>				<b>\$ 704,845.00</b>

### b. Program Fringe Benefits

Position/Name	Fringe Benefits %	Total Fringe
Program Director -Leticia Marulanda	31%	\$ 13,818.00
Associate Director -Sofia Segura-Perez	31%	\$ 21,242.00
Nutritionist -Gilma Galdamez	31%	\$ 16,849.00
Nutritionist -Ana Ferreras	31%	\$ 13,014.00

Group Leader/Nutrition Educator - Maria Arroyo	31%	\$ 12,649.00
Nutrition Educator - Paula Agudelo	31%	\$ 11,391.00
Nutrition Educator - Josefa Correa	31%	\$ 11,473.00
Nutrition Educator - Alfred Feliciano	31%	\$ 10,322.00
Nutrition Educator - Ruth Gonzalez	31%	\$ 12,340.00
Nutrition Educator -Alexis Hidalgo	31%	\$ 11,251.00
Nutrition Educator – Xaimar Cruz	31%	\$ 9,920.00
Nutrition Educator - Lusero Rodriguez	31%	\$ 10,528.00
Nutrition Educator - Surelys Ramos Flores	31%	\$ 10,119.00
Nutrition Educator - Migdalia Texidor-Huertas	31%	\$ 12,437.00
Nutrition Educator - Jessenia Turcios	31%	\$ 10,739.00
Program Assistant - Teresita Marquez	31%	\$ 13,555.00
Infant Feeding Coordinator - Bethany Salguero	31%	\$ 3,100.00
Prenatal Nutrition Coordinator-Iris Nieves Cross	31%	\$ 2,280.00
Prenatal Nutrition Educator- Maria Serrano	31%	\$ 11,474.00
<b>Total Fringe Benefits from section (b)</b>		<b>\$ 218,501.00</b>

**Total Program Salaries & Fringe Benefits from sections (a & b) combined**

**\$923,346.00**

## Template 4: SNAP-Ed Budget Information by Project

### Information & Budget by Project 2020

#### Section A. Budget Summary for Sub-Grantee

Refer to Appendix E. for additional information on allowable costs.

#### ***Contracts/Grants/Agreements for nutrition education services:***

Provide the information below for each contract, grant, or agreement.

#### ***Name of sub-grantee:***

Hispanic Health Council, Inc. SNAP-Ed. Program

#### ***Total Federal funding, grant:***

**\$1,308,111**

#### ***Description of services and/or products:***

The HHC SNAP-Ed Program utilizes a comprehensive life course approach to improve the nutrition and physical activity levels of SNAP recipients. Its nutrition and exercise education efforts use direct and indirect education, as well as a variety of media channels to reach the target population with the main educational messages. HHC SNAP-Ed direct education services are provided through group and individual education using a mixture of behavioral messaging and active engagement activities. The frequency of these activities are designed to reinforce the educational messages which are based on the latest 2015 USDA Dietary Guidelines, My Plate food guide and CDC 2008 physical activity recommendations. The program offers nutrition education for younger children using a series of interactive puppet shows, and jeopardy games for older children, both of which have follow-up classroom activities for teachers, as well as nutrition education for parents of children attending these presentations. The nutrition activities conducted at the after-school program and at the summer camps also include the delivery of puppet shows and jeopardy games as well as a variety of nutrition and exercise activities, including one for youth from 11-13 years old known as *Media-Smart-Youth: Eat, Think and Be Active* conducted during the summer time. Group presentation delivered to parents consist of nutrition and exercise workshops aimed to increase their knowledge and abilities to facilitate the adoption of healthier nutrition and physical activity behaviors. The program also delivers education among programs and initiatives strongly linked to a PSE; 1) HHC Maternal and Child staff is trained by the HHC-SNAP-Ed program to educate their clients about good nutrition and exercise topics, all these programs are part of a state funded programs or work with a network of hospitals in the region to provide support for pregnant, lactating and post-partum women to increase their access to food assistance and health resources available for them; 2) Nutrition education is also provided at all Hartford Mobile Market (HMM) stops,

which is an initiative to increase access to fresh produce at affordable prices among low-income neighborhoods in Hartford, the stops include senior centers, community clinics and agencies, the program also promotes the HMM through e-texting delivered to participants receiving group or individual HHC SNAP-Ed education; 3) The HHC is also member of a Community Supported Agriculture (CSA) Farm known as Holcomb Farm project, the fresh organic produce are used to provide nutrition education about the benefits of eating fresh produce, provide recipes, conduct food tasting activities and link participants to local farmer markets accepting SNAP benefits. HHC-SNAP-Ed direct nutrition education activities are complemented by indirect education, delivered through the following channels: media presentations conducted at local Spanish Radio and TV; distribution of nutrition and exercise information to parents at schools; and through nutrition and exercise e-texting messages to adult participants of HHC SNAP-Ed direct education activities, who wish to receive it. The program is also implementing a bilingual social media marketing campaign tailored to promote a higher intake of fiber rich foods among parents of small children. Program staff is part of coalition, task forces and food policy groups in the state working of decreasing childhood obesity, and/or increasing food security.

***Cost of specific services and/or products:***

**\$1,308,111**

**Section B. Project Costs**

For each sub-grantee, provide the Federal cost for each planned nutrition project. Provide a detailed breakdown that includes, at a minimum, the information contained in the following table. An Excel version of this form is available online at the SNAP-Ed Connection. **New:** Please note the clarification of some cost categories below in order to comply with the Agriculture Improvement Act of 2018. **End of new material.**

**Federal Fiscal Year: 2020**

**State: Connecticut**

**Sub-grantee Name: Hispanic Health Council, Inc. SNAP-Ed Program**

Expenses	Unobligated Balances (Carry-over) from Previous FY	Current FY Budget	Non-Federal Support
Salary/Benefits		\$923,346.00	
Contracts/Sub-Grants/Agreements		\$0	
Non-Capital Equipment/ Office Supplies		\$39,566.00	
Nutrition Education Materials		\$5,754.00	
Travel		\$27,938.00	
Building/Space Lease or Rental		\$49,885.00	
Cost of Publicly-Owned Building Space		\$0	
Maintenance and Repair		\$0	
Institutional Memberships and Subscriptions		\$0	
Equipment and Other Capital Expenditures		\$0	
Total Direct Costs		\$1,046,489	
Indirect Costs (Indirect Cost Rate= _25%____)		\$261,622	
Total Federal Funds		\$1,308,111	Leave blank
<b>Total Federal Funds Including Unobligated Balance from Previous FY</b>	Leave Blank		Leave Blank
Estimated Unobligated Balance from Current FY to Next FY, if any	Leave blank		

Signature of Responsible Official: \_\_\_\_\_

Date: \_\_\_\_\_

Budget narrative:

**Salary/Benefits: \$923,346 (\$704,845-Salaries + \$218,501-Fringe Benefits)**

Position	FTE	Salary	Fringe Benefits (Rate)	Total
Program Director	0.45	\$ 44,574.00	\$ 13,818.00 (31%)	\$ 58,392.00
Associate Director	1.00	\$ 68,524.00	\$ 21,242.00 (31%)	\$ 89,766.00
Nutritionist	1.00	\$ 54,351.00	\$ 16,849.00 (31%)	\$ 71,200.00
Nutritionist	1.00	\$ 41,981.00	\$ 13,014.00 (31%)	\$ 54,995.00
Group Leader/Nutrition Ed.	1.00	\$ 40,804.00	\$ 12,649.00 (31%)	\$ 53,453.00
Nutrition Educator	1.00	\$ 36,746.00	\$ 11,391.00 (31%)	\$ 48,137.00
Nutrition Educator	1.00	\$ 37,009.00	\$ 11,473.00 (31%)	\$ 48,482.00
Nutrition Educator	1.00	\$ 33,296.00	\$ 10,322.00 (31%)	\$ 43,618.00
Nutrition Educator	1.00	\$ 39,806.00	\$ 12,340.00 (31%)	\$ 52,146.00
Nutrition Educator	1.00	\$ 36,294.00	\$ 11,251.00 (31%)	\$ 47,545.00
Nutrition Educator	1.00	\$ 32,000.00	\$ 9,920.00 (31%)	\$ 41,920.00
Nutrition Educator	1.00	\$ 33,961.00	\$ 10,528.00 (31%)	\$ 44,489.00
Nutrition Educator	1.00	\$ 32,643.00	\$ 10,119.00 (31%)	\$ 42,762.00
Nutrition Educator	1.00	\$ 40,119.00	\$ 12,437.00 (31%)	\$ 52,556.00
Nutrition Educator	1.00	\$ 34,643.00	\$ 10,739.00 (31%)	\$ 45,382.00
Program Assistant	1.00	\$ 43,726.00	\$ 13,555.00 (31%)	\$ 57,281.00
Infant Feeding Coordinator	0.25	\$ 10,000.00	\$ 3,100.00 (31%)	\$ 13,100.00
Prenatal Nutrition	0.15	\$ 7,354.00	\$ 2,280.00 (31%)	\$ 9,634.00

Coordinator			(31%)	
Prenatal Nutrition Educator	0.80	\$ 37,014.00	\$ 11,474.00 (31%)	\$ 48,488.00

**Contracts/Sub-Grants/Agreements:**

N/A

**Non-capital equipment/office supplies: \$39,566**

\$4,369.00	Office Supplies. Includes cost of general office supplies such as pens, papers, envelopes, binders, calendars, laminating rollstocks, folders, toner, trifold boards, laminated pouches, Velcro, etc.
\$8,122.00	Program Supplies. Purchase program supplies needed to perform nutrition education activities, including: microphones/headsets (\$80/each X 4), speakers (\$230/each X 3), rolling luggage bags (\$120/each X 8), puppets (\$50/each X 10 & \$30/each X 20), fabrics/drapes for puppet theaters (\$5.50/yard X 20), promotional pens (\$0.45/each X 3,700) and promotional pencils (\$0.50/each X 1,814), promotional measuring cups (\$1.20/each X 600) and food ingredients for food tasting (\$50/session X 33).
\$6,815.00	Printing & Copying. Covers the cost of duplication and printing needs of the program. This includes forms, educational materials, coloring books, posters, etc. (\$0.10/copy X 68,150)
\$720.00	Postage. Covers cost of program correspondence with clients and other social service providers. (\$0.48/postage X 1,500)
\$13,500.00	Phones. Cover cost of telephone and internet services for the program staff. (\$75/month X 12 months X 15 staff)
\$3,000.00	Cellphone. Cover cost of mobile phone services for program staff while performing

	program activities throughout the State. (\$50/month X 5 lines X 12 months)
\$3,040.00	E-Z texting Platform \$70.00 per month x 12=\$840.00  Facebook campaign:\$20.00 per day for a total of 100 days=\$2,000  Online course \$200 – Learn to develop an effective social marketing campaign.

***Nutrition Education Materials: \$5,754.00***

Item	Cost/item	Amount	Total Cost/item
Five Food group, Exercise, Food Safety Stickers	\$ 0.07	20,000	\$ 1,400.00
My Plate placemats	\$ 0.50	2,000	\$ 1,000.00
Eating Smart Bracelet	\$ 1.00	400	\$ 400.00
Stretching bands with nutrition and exercise messages	\$ 1.98	500	\$ 990.00
Shopping tote bag with nutrition message	\$2.27	500	\$1,135.00
“Eating and being active” curricula	\$323	1 set	\$323.00
Worksheets and handouts lessons 2-8 from “Eating and being active” curricula	\$31.23	13 sets (1 set = 50)  (5 sets English)  (8 sets Spanish)	\$406.00
Worksheets and handouts for physical activities lessons from “Eating and being active” curricula	\$20	5 sets (1 set = 50)	\$100.00
		Total	\$5,754.00



**Travel: \$27,938**

Please see info in Section C

**Building/space lease or rental: \$49,885**

A total 2,362 sq. ft. X \$1.76/sq. ft. X 12 months. Cover cost of space occupied by program staff.

**Cost of publicly-owned building space:**

N/A

**Maintenance and repair:**

N/A

**Institutional memberships and subscriptions:**

N/A

**Equipment and other capital expenditures:**

N/A

**Total direct costs: \$1,046,489**

**Total indirect costs:**

**\$261,622 @ 25% of direct costs of \$1,046,489.** Supports the agency's federally approved indirect cost rate of 25%. These expenses are attributed to general agency costs, such as salaries and expenses of the President & CEO, Directors of Finance and Human Resources, and fiscal staff.

**Total Federal funds: \$1,308,111**

**Estimated unobligated balances (carry-over) from current FY to next FY, if any:**

N/A

## **Section C. Travel**

### **In-State Travel**

**Travel Purpose:** The HHC SNAP-ED program provides nutrition and exercise services to low-income individuals and families living at seven targeted towns across the state. These services include puppet shows, jeopardy games, adult group presentations, media presentations, and tables with information taking place at schools, child care

centers, community agencies, clinics, and other community settings. In addition, program staff will participate in local trainings and statewide meetings. Program staff is expected to travel around the State to do program activities, attend meetings and trainings/conferences,

***Travel destination (city, town or county or indicate local travel):***

From Hartford, CT to: Hartford, CT area, Bridgeport CT, New Haven CT, New Britain, CT, Norwich, CT, New London, CT, and Waterbury, CT.

***Number of staff traveling:***

15 staff members

***Cost of travel for this purpose:***

ACTIVITIES CONDUCTED BY NUTRITION EDUCATORS					
Round trip from Hartford to:	# of miles per day	# of trips/week	# of weeks per year	Mileage rate per mile:\$0.58	Total
Hartford	6	15	45	0.58	\$2,349
New Haven	80	4	44	0.58	\$8,166
Bridgeport	120	3	37	0.58	\$7,726
New Britain	25	2	40	0.58	\$1,160
Waterbury	80	1	20	0.58	\$928
Norwich	80	2	30	0.58	\$2,784
New London	95	1	14	0.58	\$771
				Sub-Total	\$23,884

ACTIVITIES CONDUCTED BY NUTRITIONISTS					
Round trip from Hartford to:	# of miles per day	# of trips/week	# of weeks per year	Mileage rate per mile:\$0.58	Total
Hartford	6	1	8	0.58	\$28

New Haven	80	1	14	0.58	\$650
Bridgeport	120	1	12	0.58	\$835
New Britain	25	1	10	0.58	\$145
Waterbury	80	1	5	0.58	\$232
Norwich	80	1	3	0.58	\$139
New London	95	1	2	0.58	\$110
				Sub-Total	\$2,139
				Total	\$26,023

**Total In-State Travel Cost: \$26,023**

**Out-of-State Travel**

**Travel Purpose:** Justification of need for travel, including how attendance will benefit SNAP-Ed

This allocation is to cover of cost of one staff to attend the 2020 Society for Nutrition Education and Behavior (SNEB) Annual Conference taking place from July 19 to July 21, 2020 in San Diego, CA. The conference is for professionals actively involved in nutrition education and health promotion and provides forums for sharing innovative strategies for nutrition education, and disseminating of research findings. This is also an opportunity to meet nationwide SNAP-Ed coordinators as well as an opportunity for sharing of information and experiences in program implementation. Program staff sends abstract for presentations about the program at this conference.

**Travel destination (city and State):**

SNEB 2020 Annual Conference - San Diego, CA - July 19-21, 2020

**Number of staff traveling:**

1

**Cost of travel for this purpose:**

Hotel - \$175 per night X 3 nights = \$525.00

Conference Registration= \$590.00

Airfare - Hartford, CT to San Diego =\$501.50

Local transportation (airport to hotel roundtrip) = \$50.00

Per Diem (based on GSA rate):

\$71.00 per day x 2 full days=\$142.00 + \$53.25 per day x 2 half days=\$106.50.

\$142.00 + \$106.50 = \$248.50

Estimated total                      \$1,915

***Total Out-State Travel Cost: \$1,915***

**Section B. Project Costs**

For each sub-grantee, provide the Federal cost for each planned nutrition project. Provide a detailed breakdown that includes, at a minimum, the information contained in the following table. An Excel version of this form is available online at the SNAP-Ed Connection. **New:** Please note the clarification of some cost categories below in order to comply with the Agriculture Improvement Act of 2018. **End of new material.**

**Federal Fiscal Year: 2020**

**State: Connecticut**

**Sub-grantee Name: Hispanic Health Council, Inc. SNAP-Ed Program**

Expenses	Unobligated Balances (Carry-over) from Previous FY	Current FY Budget	Non-Federal Support
Salary/Benefits		\$923,346.00	
Contracts/Sub-Grants/Agreements		\$0	
Non-Capital Equipment/ Office Supplies		\$39,566.00	
Nutrition Education Materials		\$5,754.00	
Travel		\$27,938.00	
Building/Space Lease or Rental		\$49,885.00	
Cost of Publicly-Owned Building Space		\$0	
Maintenance and Repair		\$0	
Institutional Memberships and Subscriptions		\$0	
Equipment and Other Capital Expenditures		\$0	
Total Direct Costs		\$1,046,489	
Indirect Costs (Indirect Cost Rate= <u>25%</u> )		\$261,622	
Total Federal Funds		\$1,308,111	Leave blank
<b>Total Federal Funds Including Unobligated Balance from Previous FY</b>	Leave Blank		Leave Blank
Estimated Unobligated Balance from Current FY to Next FY, if any	Leave blank		

Signature of Responsible Official:  \_\_\_\_\_

Date: 11/16/19 \_\_\_\_\_

## Project 4 - UConn Health Husky Nutrition

## Template 2: SNAP-Ed State Goals, Objectives, Projects, Campaigns, Evaluation, and Collaboration

### Reporting Progress on State-Level Goals and Objectives

All Husky Nutrition data collections forms are stored digitally either in Access, Excel, or the EARS data collection program developed by UCONN Health. The Institutional Review Board has approved data collection and storage procedures for these files. De-identified raw data files from these files can be easily shared with the state and when appropriate integrated with files from other IAs. Surveys answered by SNAP recipients on the snap4ct webpage are directly aggregated into data files. However, Husky Nutrition staff have largely abandoned directly collecting information via tablet or smartphone because of the number of devices needed to collect data, the amount of time available for collection, and partner access to tablets. For example, recipients can complete paper and pencil surveys all at once; thus assuring higher participation in the evaluation and uniformity of data collection procedures. Staff digitize the responses later.

The research finance departments at UCONN Health and UCONN closely monitor all SNAP-Ed expenditures. All transactions are digitally recorded and traceable for auditors.

### Description of projects/interventions:

***Project/Intervention Title:***

*Husky Nutrition* at UConn Health

***Related State Objective(s):***

*Husky Nutrition* supports CT SNAP-Ed State Level Objectives:

Goal 1: Objectives: 1.1 - 1.9

Goal 2: Objectives: 2.1 and 2.2

Goal 3: Objectives: 3.1 - 3.5

*Husky Nutrition*, the first of the Connecticut contractors funded by SNAP-Ed in 1994, engage SNAP recipients and those eligible to receive SNAP in food, nutrition, and physical activity programming, while collaborating with community partners to assess needs, improve environments, develop policy, and conduct evaluations to improve the health of this population (<http://publichealth.uconn.edu>). This plan outlines each *Husky Nutrition* initiative to reduce obesity and chronic disease with particular focus on reaching families of young children in early childcare and food retail sites with our direct education program efforts, and to support, not only our programs, but the state-wide SNAP-Ed education efforts with the SNAP4CT.org online platform. In addition, the plan

further integrates program design with the social-ecological model, multi-level interventions and community and public health approaches to improve nutrition and obesity prevention with the following measures:

- First, we plan to increasingly partner with community sites that are involved with or intend to engage in a developed or emerging PSE effort so that our program complements those of a larger initiative for maximum impact.
- Secondly, we will develop and implement nutrition education plans for community sites resulting in delivering SNAP target populations with multiple exposures to key nutrition education messages. Simultaneously, interventions will be coordinated across community settings for target populations and SNAP4CT.org will implement a targeted social media campaign reinforcing these same messages to individuals using the website and social media platform.
- Thirdly, we plan to partner closely with *Husky Sport* to develop and implement a comprehensive, coordinated multi-level intervention for the Northeast neighborhood of Hartford which is a recognized Promise Zone.

**Audience:**

*Husky Nutrition* initiatives reach SNAP recipients, low-income individuals who are eligible to receive SNAP benefits or other means-tested Federal Assistance programs, and individuals residing in communities with a significant low-income population. In alignment with the needs assessment findings, the majority of programming efforts will focus on preschool aged children and their parents/caregivers. Additionally, some programming will be provided for other adults aged 18 – 59 and older adults 60+.

<b>Husky Nutrition Direct Education (Approach One)</b>	<b>SNAP Participants - Target Audience(s)</b>
SNAP4CT.org website and social media	Parents, caregivers and adult family members of young children, adults 18 – 59 and adults 60+
Husky Reads	Young children ages 2 – 5, parents, caregivers and adult family members of young children
Little City Sprouts (HFS)	Young children ages 2 – 5, parents, caregivers and adult family members of young children
Husky Nutrition On-the-Go	Parents, caregivers and adult family members of young children, adults 18 – 59 and adults 60+
Husky Smart Shopping	Parents, caregivers and adult family members of young children, adults 18 – 59 and adults 60+
<b>PSE and Collaborations (Approaches Two and Three)</b>	<b>Target Audience</b>
SNAP4CT.org dissemination	Public, private agencies and programs



	serving SNAP participants; and those eligible to receive SNAP
Husky Sport/Husky Nutrition Northeast Hartford Partnership	Residents of Hartford’s Northeast neighborhood (06120 ZIP Code) which is part of the federally designated Promise Zone
Early childcare center food, nutrition, and physical activity policy and written policy improvement	Early Care and Education providers (program directors, classroom teachers); parents and caregivers of preschoolers; and policy makers
Husky Smart Shopping retail food systems partnership	Retail stores serving low-income, high risk areas; franchise/store owners; store RDs; and social media marketing staff members
Coordination with the DSS Unit on Aging	DSS Department of Social Services Unit on Aging management and Area Agencies on Aging nutrition educators
Engagement and collaboration with public policy leaders and influencers	State, municipal and nonprofit organizations involved with policy and systems change initiatives to improve food access, food quality, and nutrition education targeting low-income residents in CT

*Husky Nutrition* will deliver the majority of interventions in Connecticut’s municipalities with the highest level of need, including Priority Groups 1 and 2 and Risk Level 1 as identified in the Needs Assessment. A focal point of programming will be early care and education (ECE) sites and retail food outlets located in these municipalities, as they represent an opportunity for multi-component, multi-level interventions in places where many families with young children in low-income communities spend time. For a site to be eligible for programming and interventions, *Husky Nutrition* staff use CT-DSS data on the number of individuals in the municipality receiving SNAP coupled with census tract data on the percent of individuals in that tract living in poverty, and the percent of children receiving free and reduced lunch at the closest school. Farmers markets that can process SNAP and/or WIC electronic payments and/or accept double value coupons receive priority.

***Food and Activity Environments:***

*Husky Nutrition* direct education programs, which can be delivered in English and/or Spanish, are tailored to meet the needs of the target audience at each site based on their age, physical ability, and site location (physical environment). This project further reflects the needs of the audience in a number of ways:

- For ECE sites with ongoing education programs, *Husky Nutrition* staff will develop a standard baseline profile with relevant information for the types of site.

That information will include a catalog of food, nutrition and physical activity programs currently occurring at the early care and education site or agency, as well as, the site's inclusion in any evaluations or other projects that might influence program outcomes.

- Retail food outlets, such as grocery stores and farmers markets, are the primary venues for *Husky Smart Shopping* programs. *Husky Smart Shopping* tailors the program to the individual site and provides hands-on learning opportunities for SNAP participants using curricula centered on food demonstrations and recipe distribution that highlight fruits and vegetables, label reading, and food-resource management skills. Sites that provide complimentary incentives to the nutrition education program receive priority scheduling. When transportation or physical limitations make store tours impossible to conduct, nutrition educators offer classroom style workshops as a substitute for in-store education.
- The SNAP4CT.org website and social media platform provides a complementary and alternative mode to effectively target and reach SNAP participants and those eligible to receive SNAP 24 hours a day, seven days per week. The ability to target messaging using demographics such as income, race/ethnicity and location (zip code) is a powerful tool to ensure that messages are reaching the intended audience. Website, blog, and eNewsletter content are used to support direct education initiatives. Farmers markets that accept EBT are promoted to targeted zip codes to inform participants when and where they may stop at these retailers.
- PSE efforts are described in two sections, program description and coordination of efforts. SNAP-Ed fully funds integral involvement by *Husky Nutrition* in the former. See the table under the latter that describes the degree of involvement and funding by SNAP-Ed.

### ***Project Description:***

*Husky Nutrition* helps participants gain insight and implement strategies to overcome the challenges of eating healthy on a limited budget when access to fresh fruits and vegetables and healthy beverages is limited. The following four key messages guide *Husky Nutrition* direct education.

### **Key messages:**

**Build a healthy, affordable, plate:** Make half your plate fruits and vegetables (seasonal items, sales, canned, frozen and fresh options). Switch to skim or 1% milk. Make at least half your grains whole.

**Cut back on foods high in solid fats, added sugars, and salt:** Choose foods and drinks with little or no added sugars. Look out for salt (sodium) in the food items you buy - it all adds up. Eat fewer foods that are high in solid fats. Eat tasty, affordable substitutions and homemade options.

**Be physically active your way:** Be physically active daily and in a way that matches your age and ability.

**Parents and caregivers are role models:** Be a good role model. Realize that what you choose to eat and drink and what your level of physical activity are important for your own health and also for your children's health. You are your children's most important role model. Your children pay attention to what you do more than what you say.

These key messages are the focal point connecting direct education programming and the multi-dimensional PSE and public health strategies outlined in this plan. During this upcoming 3-year cycle, *Husky Nutrition* will focus its direct education and PSE efforts in two realms. *Husky Nutrition* educators will implement the following five programs online and at school and center-based early childcare and education (ECE) centers and retail food venues such as grocery stores and farmers markets. The direct education programs that target preschoolers and their families will occur with high frequency at the various ECEs and the local retail food establishments identified that serve the same population. For other adult SNAP participants, nutrition educators will conduct programs at a lesser intensity and frequency at other community locations such as WIC offices, medical centers, and public libraries to ensure optimal reach of the target audience.

The five coordinated<sup>117</sup> programs include:

SNAP4CT.org Online learning platform

Husky Reads

Little City Sprouts

Husky Nutrition On-the-Go

Husky Smart Shopping

### **1. SNAP4CT.org Online Learning Platform**



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<sup>117</sup> **By year 3**, Educators will coordinate messages by community site resulting in SNAP participants receiving multiple exposures to the same message. **Simultaneously As applicable**, SNAP4CT.org will provide a targeted social media campaign reinforcing those same messages to individuals using the website and social media platforms.

The SNAP4CT.org website and associated social media channels form an online (virtual learning) platform providing the SNAP-Ed eligible population with nutrition and healthy lifestyle education and resources, which are accessible via computer and mobile devices. *Husky Nutrition* maintains this online platform as a hub for all its programs, partners, and contractors, providing tools and resources in support of direct education initiatives, and serving as a point for collaboration and information dissemination for all CT SNAP-Ed contractors, as well as community partners who serve the SNAP population.

The SNAP4CT.org online platform:

- Provides direct communication with the SNAP-Ed and eligible population through its “Ask a Nutritionist” tool which enables the target population to ask specific questions of *Husky Nutrition* Registered Dietitians, or to make a general requests for popular nutrition topics (Heart Healthy Diet, Increasing Fruit and Vegetable Intake, Kid-Friendly Foods, Quick and Easy Meals, Decreasing Added Sugar). Specific nutrition questions are answered based on SNAP-Ed guidelines within one to two business days while general nutrition topics are delivered instantly via one-page infographics. Communication is also delivered through an educational, bi-weekly monthly eNewsletter sent to subscribers (SNAP and SNAP-Ed eligible participants, and other engaged visitors). Likewise, *Husky Nutrition* staff interact with social media visitors directly via posts and comments on Facebook, Instagram, and Twitter.
- Disseminates food, nutrition, and physical activity promotion information through simple, targeted, educational messages. These messages are delivered via detailed recipes with colorful photos, simple preparation instructions, and nutritional content (such as MyPlate® and tips to decrease sugar sweetened beverage consumption); through videos that offer grocery shopping tips and simple cooking demonstrations; with infographics that detail important nutritional guidelines; in blog posts that explain popular nutrition topics; with a bi-weekly monthly eNewsletter; and through social media channels which feature content in a concise, mobile-friendly format.
- Serves as an educational resource available 24/7 for participants of all *Husky Nutrition* activities. Many of the online materials, such as recipes and tip sheets, can be downloaded and printed as PDF documents, making them helpful resources for other SNAP-Ed contractors as well as other organizations who directly serve SNAP-Ed eligible individuals.
- Promotes program communication, coordination, and cross-promotion of events and education materials among CT SNAP-Ed contractors. All SNAP-Ed CT contractors post direct education events on a Google calendar. The calendar,

which is embedded on the SNAP4CT.org website, updates in real-time, therefore, allowing contractors and CT-DSS staff to determine if all program/educational needs are being met as outlined in the needs assessments.

- Ensures promotion of SNAP4CT.org to as many SNAP-Ed eligible persons as possible by utilizing a variety of web marketing techniques to drive traffic to the website. Strategies include optimizing the site for keywords that visitors would typically use, carefully monitoring site traffic through Google Analytics, utilizing Google AdWords for terms that are pertinent to the target audience, and by regularly posting on social media outlets. Due to search term optimization, one major point-of-entry for the website is the “DSS offices and SNAP Help” web page in the “Resources” section of the site:  
<http://www.snap4ct.org/resources.html>.

When an individual comes to the website, they are encouraged to interact with the content through a variety of pertinent call-outs. For example, a vibrant “Ask a Nutritionist” button encourages direct interaction with our dietitians, and a colorful image of a “Recipe of the **Week Month**” guides visitors to our recipes section. Call-outs also invite participants to subscribe to the regularly published eNewsletter and receive a free downloadable cookbook of easy, budget-friendly recipes. This has led to significant and consistent growth in online subscribers.

*Husky Nutrition* educators also employ more traditional tactics to bring the target audience to the online platform. These efforts include instructing participants at direct education programs on how they can access the site using a computer, cell phone, or tablet; providing sample education materials or recipes highlighting the website; and offering a promotional card or magnet that describes the website and provides the web address, [www.SNAP4CT.org](http://www.SNAP4CT.org). *Husky Nutrition* staff also engage with key community collaborators, giving them educational and promotional materials that include information on accessing SNAP4CT.org’s online platforms (website and social media channels), and requesting that they include a link to the site on their own websites. Likewise, through social media, staff members interact directly with organizations that serve SNAP and SNAP-Ed eligible individuals, broadening the reach of the nutrition and health messages.

*Husky Nutrition* expects to reach visitors from Connecticut at a total rate of **200,000 online interactions in FY 2019, increasing to** 225,000 **online interactions** in FY 2020, and to 250,000 FY 2021 (budget permitting) through its online platforms (SNAP4CT.org website and social media channels). To track and report online usage and reach we will be predominantly focused on direct interactions such as page views, form submissions, newsletters opened, videos viewed and user responses such as “likes”, “follows” and comments provided by users. As outlined under key performance measures later in this plan, filtered Google Analytics data and social media platform metrics will guide

development of content and marketing efforts to ensure that the online platforms' primary users are SNAP recipients and individuals who are likely eligible to receive SNAP benefits.

## 2. *Husky Reads*

A well-established SNAP-Ed program, has been ongoing since 1998. Inspired by the nationally accepted American Academy of Pediatrics' program "Reach Out and Read," *Husky Reads* was first designed for promotion of health and nutrition habits by reading nutrition-focused, health-oriented books to young children in pediatric and health clinics. A USDA Higher Education Challenge Grant (2005-2010)<sup>118,119</sup> supported the early development of the *Husky Reads*' curriculum and its delivery method. Over time, *Husky Reads* has grown into a food and nutrition, literacy-based intervention for preschool age children designed to increase MyPlate literacy while promoting fruits and vegetables. *Husky Reads* includes a series of 10 weekly lessons lasting 30 minutes. Generally, the program is delivered as a series of lessons for preschoolers enrolled in ECEs. At times, individual lessons **adapted** from the 10-week series are delivered as stand-alone single sessions of 20-90 minutes to children, often along with their parents/caregivers, **in conjunction with the U.S. Department of Agriculture's (USDA) Summer Food Service Program (SFSP)**, at WIC clinics, public libraries, medical centers, and other community sites in areas with a high concentration of the SNAP-Ed eligible population. *Husky Nutrition* educators (trained students engaged in a university service-learning class) conduct structured lessons including reading food, health and physical activity-themed books to preschoolers, playing activities that reinforce the learning objectives, and offering food samples that encourage children to taste different foods in a positive and supportive environment. Each of the books selected for use with the *Husky Reads*' lessons come from the Food and Nutrition Fun for Preschoolers Resource List.<sup>120</sup>

The foods selected for tasting correspond to the MyPlate<sup>®</sup> food groups with an emphasis on fruits and vegetables. The ECE directors and staff are encouraged to use the [www. SNAP4CT.org](http://www.SNAP4CT.org) website and resources as an on-going strategy to reinforce in-class learning for parents and caregivers.

In FY 2019, the *Husky Nutrition* team will conduct 800 *Husky Reads* educational sessions at 25 – 30 sites



<sup>118</sup> Poehlitz PM, Pierce MB, and Ferris AM. (2006). Delivering nutrition education in a service-learning course. *J. Nutr. Educ. Behav.* 38:388-9.

<sup>119</sup> Pierce MB, Havens E, Poehlitz M, Ferris, AM. (2012) "Evaluation of Community Nutrition Service-Learning Program: Changes to Student Leadership and Cultural Competence." *North American Colleges and Teachers of Agriculture*, 56:3, 10-16.

<sup>120</sup> ([https://www.nal.usda.gov/sites/default/files/fnic\\_uploads/fun\\_preschool.pdf](https://www.nal.usda.gov/sites/default/files/fnic_uploads/fun_preschool.pdf)).

reaching approximately 3,000 participants with 13,000 contacts of direct nutrition education. The number of contacts will remain steady through FYs 2020 and 2021 with a goal of increasing the coordination of messages among sites and surrounding area by one site per year year 3.

### 3. *Little City Sprouts*

*Little City Sprouts* is a Farm to Preschool program of the Hartford Food System (HFS), providing preschool children with the opportunity to know about, grow, and taste fresh, healthy food through food-related field trips, gardening, nutrition, and cooking lessons designed for them. *Husky Nutrition* provides financial support and technical assistance with nutrition content for curricula and materials for educational program delivery. Through this



intervention, the Hartford Food System develops the curricula in coordination with *Husky Reads* and builds or maintains the raised-bed gardens at each program site and will contribute to enhancing the preschool environment by providing vegetables and herbs to be used in conjunction with its nutrition education sessions. The research-tested CATCH Early Childhood curriculum will be used for the majority of the 25 lessons delivered and there will be 11 supplemental lessons that provide additional learning specific to maintaining the school's garden bed. In addition, Trinity Health Systems Wellbeing 360 funded the Hartford Food System to develop a program, "*Little City Sprouts Plus*," that expands *Little City Sprouts* in the northeast section of Hartford, CT and adds a parent education component to the program. While *Husky Nutrition* does not support this program financially, the curriculum will also be coordinated with *Husky Reads*. In FY 2019, *Little City Sprouts* will work with 7 - 10 ECE sites and 550 children delivering 5 sessions of two hours each over the course of the school year and summer. In FY 2020, *Little City Sprouts* will work with 11 ECE sites and 303 children (participants) delivering 25 lessons of 1 hour each over the course of the school year and summer. For the 20 classrooms LCS will visit we anticipate a total of 500 educational sessions delivered. Contact numbers will equal 6,000 per year and will remain stable in FY 2021. Contact numbers supported by SNAP-Ed will remain stable in FY 2020 & 2021. ECE sites for programming will be determined in conjunction with strategic planning with the *Husky Reads*' Manager (S. Coleman) and, when possible, will be provided as a complementary intervention for Hartford's ECE programs that participate in those sites where *Husky Reads* and parent education programs are occurring.

### 4. *Husky Nutrition On-the-Go*

**Healthy Beverage Series:** *Husky Nutrition* educators deliver a ten-week series entitled the “*Healthy Beverage Series*” to parents and non-parental caregivers of preschoolers. They deliver targeted messaging and education focused on reducing sugary drink consumption, limiting use of fruit juice to American Academy of Pediatrics’ recommended levels, and promoting water consumption for their children. This program was originally developed as part of a funded project in the USDA Childhood Obesity Prevention Initiative (USDA/CSREES: 2008-55215-19071, Effectiveness of an IMB-based Intervention for Reducing Sweetened Beverage Consumption in Preschool Children, A. Ferris PI)<sup>121</sup>. The protocol for this intervention is a registered Clinical Trial (NCT03957148) and is approved by UCONN Health Institutional Review Board (IRB IE-08-292S-2). For this intervention, students enrolled in a university service-learning class greet parents when they pick up their children from school and provide a very brief interactions for ten weeks with parents while standing in front of a themed display board. The intervention’s cumulative direct education exposure lasts approximately 50 minutes. Each week of this ten-week intervention centers on a tailored message, game, and supportive display. In FY 2019, the *Husky Nutrition* team will conduct 50 sessions at 4 – 6 sites reaching approximately 1,000 participants and 1,500 contacts. Program delivery will remain stable in FY 2020 through FY 2021 with a goal of increasing the coordination of messages among sites and surrounding area by one site per year.

**Single Sessions:** In conjunction with other contractors, nutrition educators deliver programs using interactive display boards at community sites in targeted locales where SNAP participants and low-income families are already engaged (e.g. health fairs, family resource centers, community/senior centers, and/or commodity food distribution sites). Topics for these interactive display boards include reducing sugary drinks from the *Healthy Beverage Series*, enhancing fruit and vegetable intake using MyPlate® materials, and increasing physical activity. Curricula and demonstrations may also include recipes and nutrition/culinary tips. Total contact time per participant is under 15 minutes. The direct education incorporates a variety of strategies that promote the key messages including interactive and multimedia games or activities, demonstrations, and skill practice opportunities with the duration of the interaction being at least 20 minutes. In FY 2020 and 2021 ~~2019~~, *Husky Nutrition On-the-Go* may be conducted at 3 - 5 ~~10~~ of these events reaching 100 – 150 ~~600~~ participants. This level of service will remain stable over the 3-year term. Educators will inform and engage adult participants at these events to visit [www.SNAP4CT.org](http://www.SNAP4CT.org), sign up for the eNewsletter, and follow SNAP4CT on social media.

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<sup>121</sup> Ferris, A. M., D. Wakefield, K. Lora, C. Quesada. Caretakers receiving SNAP are responsive to education to reduce preschool child sugar-sweetened beverage (SSB) consumption. 42<sup>nd</sup> Ann Soc Nutr Educ/EB, San Diego, CA. April 2014. 14-7959.



## 5. Husky Smart Shopping

The *Husky Smart Shopping* program focuses on developing new, and enhancing existing, partnerships with retail food systems, coupled with an array of direct education strategies. The retail food systems include large and medium sized grocery stores and farmers markets in targeted low-income areas focusing on marketing and promoting healthy foods and incenting SNAP clients to purchase them. The emphasis will be on strategically building comprehensive partnerships within the Healthy Hartford Hub (described in the “Coordination of Efforts” section), with ShopRite stores, with C-Town in Hartford, and with farmers markets. Those farmers markets that process SNAP and/or WIC electronic payments and produce double value coupons receive priority.

A *Husky Nutrition* registered dietitian (RD), coordinates *Husky Smart Shopping* activities. These activities include:

- managing the partnership with store management, franchise owners, and market managers
- coordinating messaging with the SNAP4CT.org online platform
- implementing direct education delivery
- managing a multi-cultural staff to deliver programs in English and Spanish
- selecting appropriate educational topics for the audience being served (culturally relevant and appropriate foods; literacy/learning level and age appropriate; and suitable for the venue)



The direct education methods that will be available to partnering retailers and markets include:

*Grocery store tours* (in-store and classroom/virtual) – Grocery Store Tours follow the *Shopping Matters*<sup>122</sup> or *Cooking Matters at the Store* format at grocery stores and retail food outlets serving a high number of SNAP recipients. When transportation, childcare responsibilities, and physical limitations prohibit participation at the store, nutrition educators deliver full and adapted grocery store tours in a community site with mock stations set up. or via live streaming to the community site from the local grocery store.

*Video modules*: videos of grocery store tours and other single topic education modules that highlight shopping the perimeter of the store, label reading and unit pricing, and other related topics will be available. Videos are compatible for viewing on a PC, tablet,

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<sup>122</sup> <http://cookingmatters.org/educational-tools>

and smartphone. Videos are maintained online on the SNAP4CT.org platform and are available for sharing on partner websites and social media.

*Point-of-Purchase or Promotion (POP)* in retail food stores and farmers markets: POP programs include single topic interactions (label reading, unit pricing, identifying whole grains, **seasonal fruits and vegetables**, etc.) in the aisles and produce sections of mid-sized markets as well as farmers markets. Additionally, they include **recipes and food tastings demonstrations** particularly in the produce section **or in collaboration with farmers' market produce vendors whenever possible**. **As part of Smart Shopping partnerships, nutrition educators engage shoppers at the table while food retailers co-locate featured foods next to the tasting table, promote targeted foods and/or provide coupons or other incentives for target foods.**

Following is an example of a strategy incorporating direct education with targeted marketing and coordination with store partners. *Husky Nutrition* will use the [www.SNAP4CT.org](http://www.SNAP4CT.org) website and social media platform to drive nutrition messages, shopping tips, and recipes to SNAP participants who are located in the zip codes close to the retail venue and who likely shop there. At the store, nutrition educators will provide food demos and will set up a display including ingredient items from the featured recipe in order to co-merchandise these foods and promote consumer purchasing. Nutrition educators conducting the food demos will heavily emphasize ingredients such as vegetables, fruits, and whole grains and they will coordinate with store management to use ingredients that are on sale. In order to inform SNAP participants, we will promote these events using regionally targeted social media (on [SNAP4CT.org](http://SNAP4CT.org) and with the store's social media when available) and in-store advertisements such as flyers and posters.

In 2019, *Husky Smart Shopping* will work with 5 partners and conduct 100 educational sessions at 10 - 15 sites reaching approximately 2,000 participants with 3,500 contacts of direct nutrition education. In FYs 2020 and 2021 we will add 5 partners/stores and increase SNAP participant reach by 10%. **In addition, *Husky Nutrition* staff, working with the CT Department on Aging will continue to provide training sessions to nutritionists working with the Area Agencies on Aging to help them to deliver similar workshops to older adults across CT.**

Policy, systems, and environmental change programs:

### ***Husky Nutrition and Husky Sport Northeast Hartford Partnership***

As stated in the introduction, we plan to partner closely with *Husky Sport* to develop and implement a comprehensive, coordinated, multi-level intervention for the Northeast neighborhood of Hartford (ZIP code 06120), which is part of a recognized federally

designated Promise Zone. Informed through ongoing strategy discussions, it became clear that our existing programs provide parallel, often complementary activities for many of the same families without intersecting. Specifically, the Neag School of Education, *Husky Sport* program focuses on school-age children, primarily at Fred D. Wish Museum School (K-8) (PreK – 5) and delivers neighborhood-based out of school time programs for that same age group. Simultaneously, *Husky Nutrition* focuses on pre-school age children by working with children, parents, and providers in the neighborhood's early childcare centers and retail venues. In addition, both *Husky Sport* and *Husky Nutrition* staff work with the myriad city, foundation, university, healthcare, and church-based efforts to improve the well-being of residents and reduce childhood obesity in this highly impoverished area.

Beginning with the 2019-2021 SNAP-Education plan, the *Husky Nutrition* and *Husky Sport* programs will construct a framework for a multi-level program with coordinated messaging, programming, staffing, and evaluation for SNAP-Education in the 06120 ZIP Code in Hartford, CT, an area of highest need in CT with almost 50% of residents living in poverty. Over the three years of the proposed plan, the coordinated *Husky Nutrition* and *Husky Sport* programs commit to the development and implementation of a coordinated, multi-level nutrition and physical activity education plan. This plan will serve the needs of the community, improve the potential impact of SNAP-Education within the area, and evaluate the specific contribution made by SNAP-Education in meeting the community nutrition and physical activity goals, while also coordinating with other community efforts.

Of particular importance and influence on the development of the coordinated effort between *Husky Nutrition* and *Husky Sport* is the school consolidation plan of the Hartford Public Schools. In fall 2018, Simpson-Waverly School will close its doors and those students will be moved to Wish Museum School, and in fall 2019 Thurman Milner School will do the same. Starting in the fall 2019, Wish Museum School will serve children Pre-k through 5<sup>th</sup> grade. In FY 2019 and FY 2020, the leadership of our SNAP-Education Northeast Hartford Partnership will focus on:

- organizing the partnership (leadership, staff commitments, training, and coordination of current programs);
- completing an asset inventory of programs, retail establishments, and institution in the neighborhood of the expanded Wish Museum School that could support changes in food, nutrition, and physical activity in that neighborhood;<sup>123</sup>

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<sup>123</sup> We expect to draw on reports and maps produced by the Promise Zone, North Hartford Triple Aim Collaborative (the health initiative of the Promise Zone), Invest Hartford (A Robert Wood Johnson Foundation, Culture of Health supported project), Wellbeing 360 (a Trinity Healthcare initiative), the UCONN Cities Collaborative, the City of Hartford, Departments of Health and Human Services and Children, Families, Youth, and Recreation, the Community Needs Assessments of the Hartford Health Care and St. Francis Hospital (part of the Trinity Healthcare System, The Connecticut Children's

- examining state and national models to guide our work; and
- developing a draft framework for program planning

The focus for FY 2020 would be on program development, maintaining community perspective, and the evaluation and potential expansion of the UConn service-learning course offerings that engage university students and faculty in delivery of SNAP-Ed or community projects in the northeast neighborhood. During FY 2020, we will designation a nutrition educator to actively participate in on-site parent and staff engagement at the Wish Museum School to coordinate nutrition education programming and messaging to parents and teachers and to support activities being conducted by the Husky Sport team's School Culture of Health project. The target for FY 2021 activities is the initial implementation of the coordinated plan and evaluation framework. Consequently, the following three-year SNAP-ED Plan would include a well-defined and cost-effective approach for multi-level SNAP-ED programming in an area of highest need in Connecticut.

***Early childcare center food, nutrition, and physical activity written policy improvement***

Husky Nutrition will provide develop workshops and technical assistance to provide support for early childcare directors and programs who participated in the 2015-2018 policy enhancement series for the 69 centers in the City of Hartford and the 7 centers in the City of New Britain. See FY 2018 Annual report for results of this program.

**Professional Development.** Husky Nutrition will join with the UConn Husky Sport program to participate in professional development for staff. The focus of the professional development is to present and discuss effective strategies for delivering nutrition education to children, parents and adult family members and other adult SNAP participants. In addition, the training will incorporate teaching methods to engage and hold the attention of youth, and cultural competency through various workshops and presentations. Husky Nutrition staff will participate in trainings with Husky Sport twice per year (August and January). In addition, Husky Nutrition holds monthly staff meetings to discuss issues particular to their roles and program delivery.

The Assistant Director (Furbish) will work collaboratively with the Husky Sport professional development lead staff to develop the workshop topics and to share best practice ideas. The Director (Dr. Ferris) is actively involved in the curriculum development for the service learning courses associated with Husky Nutrition. Dr. Ferris oversees the development of curriculum for service learning courses, and the Program Manager (Coleman) is responsible for all aspects of course management. As part of

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Hospital, Hartford Child Wellness Alliance, and the Connecticut Office of Health Strategy to reduce the time needed to produce this inventory.

these service-learning courses, college students are trained to assist Husky Nutrition in delivering nutrition education curricula in Husky Nutrition’s programs. Service-learning courses are offered to students at the University of Connecticut through the Department of Educational Leadership and the Department of Nutritional Sciences, focusing on working with SNAP-Ed recipients in Hartford, East Hartford, Manchester, Willimantic and Norwich/New London with the following course sections:

NUSC 1161/ EDLR 1161: Husky Reads (1 credit course; average 30 students per semester /60 per year)

NUSC 3171: Husky Nutrition (3 credit course; 5 -7 per semester /10 - 14 per year)

**Evidence Base:**

Initiative	Level of Evidence	Supporting References
SNAP4CT.org Online Platform	<p>Emerging</p> <p>Site development relies on the multiple reviews available for individual components and an overall framework as outlined by Oldenburg et. al. The information derived from the in-depth Google Analytics applied to the site also provides information on reach to the target audience.</p>	<p>Oldenburg <i>et al.</i> New Technologies to Improve the Prevention and Management of Chronic Conditions in Populations, <i>Ann. Rev. Public Health</i> 2015. 36:483-505 <a href="http://www.annualreviews.org">www.annualreviews.org</a></p>
<p>“Husky Reads.” Literacy-based fruit and vegetable promotion with activity and tasting for preschool age children. This program will be the focus of a control trial in this plan.</p>	<p>Practice-tested (accepted for listing in evidence-based programs in SNAP-ED Connections).</p> <p>Husky Reads significantly increased preschoolers’ correct identification of 2 types of fruits and 2 types of vegetables. A significant correlation was found between correct identification of fruit and trying the fruit.</p>	<p>Husky Nutrition Annual Report, FY 2018: Appendix 1: Husky Reads Formative Evaluation Report; Appendix 2: Husky Reads Process Evaluation Report; Appendix 3: Husky Reads Outcome Evaluation Report.</p> <p>Coleman A, Coleman S, Ferris AM, Book-based nutritional literacy effects</p>

	<p>Other research shows 4-6 year olds exposed to vegetable-promoting picture books consumed almost twice as much carrots in proportion to other foods consumed than children without exposure to the book.</p>	<p>preschoolers' nutritional knowledge and willingness to consume fruits and vegetables: 2013 American Public Health Association National Conference, Boston, MA Paper #289287.</p> <p>de Droog SM, Buijzen M, Valkenburg PM. Enhancing children's vegetable consumption using vegetable-promoting picture books: The impact of interactive shared reading and character-product congruence. <i>Appetite</i>. 2014. 73: 73-80.</p>
<p>"Healthy Beverage Series." Brief intervention series for caregivers of preschoolers.</p>	<p>Practice-tested proceeding to research-based</p> <p>Randomized control trial with 10-week sugar-sweetened beverage education intervention and sham control on home food safety. Among SNAP recipients who consumed SSBs, the intervention group consumed significantly less SSB ounces than control at 6 months.</p>	<p>Ferris, A. M., D. B. Wakefield, K. Lora, C. Quesada. Caretakers receiving SNAP are responsive to education to reduce preschool child sugar-sweetened beverage (SSB) consumption. <i>FASEB J</i> April 2014 28:252. 8.</p>
<p>"Little City Sprouts." Farm to Preschool with gardening and CATCH EC cooking lessons.</p>	<p>Varies /-Research-tested for school-age children.</p> <p>Less available data for preschool age children. In the SNAP-Ed toolkit, the Coordinated Approach to Child Health Early Childhood (CEC) program was research tested.</p>	<p>SNAP-Ed Strategies &amp; Interventions: An Obesity Prevention Toolkit.</p> <p>Savoie-Roskos MR, Wengreen H, Durward C. (2017) Increasing fruit and vegetable intake among children and youth through gardening based</p>

	<p>Observed outcomes included a statistically significant increase in Level 5 PA, significant increase in FV intake among intervention and control groups, and a decrease in overweight and obesity in the intervention group (no change among controls). SNAP-Ed toolkit lists four programs that use farm to child and gardening as a strategy: 1 research-tested (CEC), 1 practice-tested (HOTM), 2 emerging (NYS F2PS &amp; Food Hero).</p>	<p>interventions: A Systemic review. <i>J Acad Nutr Diet</i> 117:240-250.</p>
Husky Nutrition On-the-Go, Brief interventions	<p>Practice-tested</p> <p>Average knowledge score improved significantly from 45% to 63% correct pre- to post-test. Participants also demonstrated intent to change behavior. (Pierce et al., 2011)</p>	<p>Husky Nutrition Annual Report, FY 2018, Appendix 5: Husky Smart Shopping Outcome &amp; Process Evaluation Report.</p> <p>Pierce, M.B., K. A. Hudson, K. R. Lora, E. Havens, and A. M. Ferris. (2011). The Husky Byte Program Delivering Nutrition Education One Sound Byte at a Time; <i>J. Nutr. Edu. Behav.</i> 43:135-7.</p>
Husky Smart Shopping - Grocery tours	<p>Practice-tested</p> <p>The SNAP-Ed toolkit lists Cooking Matters at the Store as practice-tested evidence-based.</p>	<p>SNAP-Ed Strategies &amp; Interventions: An Obesity Prevention Toolkit.</p> <p>Hartmann-Boyce, J. et al. (2018). Grocery store interventions to change food purchasing behaviors: a systemic review of randomized controlled trials. <i>Amer. J. Clin. Nutr.</i> 107:1004-1016.</p>
Husky Smart Shopping -	Emerging – but research-	Husky Nutrition Annual

POP	<p>tested if implemented as part of a larger program as done in Baltimore or California.</p> <p>Unpublished results from our FY2017 evaluation at farmers' markets found that of SNAP-eligible respondents who participated in the program, 66% intended to make the recipe, 59% planned to buy at least 3 vegetables at the market and 79% planned to use a financial incentive.</p>	<p>Report, FY 2018, Appendix 5: Husky Smart Shopping Outcome &amp; Process Evaluation Report.</p> <p>SNAP-Ed Strategies &amp; Interventions: An Obesity Prevention Toolkit for States lists "Pick It, Try It, Like It"</p>
Early Care PSE Change	<p><del>Practice-based / Research-tested</del></p> <p><del>There is limited evidence for policy change oriented initiatives; however, improvement in practices was considered research-tested for Go NAP SACC and practice tested for several other programs, especially as part of a broader intervention.</del></p>	<p>Annual Report, FY 2018, Appendix 4: ECE Wellness Policy Improvement: Evaluation Report.</p> <p><del>SNAP-Ed Strategies &amp; Interventions: An Obesity Prevention Toolkit for States. (National Early Care &amp; Education Learning Collaboratives; Go NAP SACC, Eat Well Play Hard in Child Care Settings).</del></p>

**Key Performance Indicators (KPIs):**

To evaluate project implementation, *Husky Nutrition* management will compare the projected outcomes with the EARS data for the number reached for each of the following numeric indicators: direct programs, direct education participants, contacts, and indirect contacts. Management will conduct further analysis of the number, type and location of community education sites; direct education programs to SNAP recipients; train-the-trainer sessions to collaborating partners; and collaboration meetings with public and private agencies, coalitions, task forces, and other planning groups that directly result in SNAP-Ed programming, to measure progress towards meeting project performance measures. In addition, *Husky Nutrition* management will monitor and record program fidelity on a regular schedule and will seek feedback about



program delivery from program educators and site directors. Specifically, program educators complete a debriefing form after conducting direct education sessions and site directors have the opportunity to complete a satisfaction survey to inform the Program Manager. The Program Manager uses this information to identify opportunities for program improvements.

<b>Husky Nutrition – Key Performance Indicators</b>	
Initiative	Indicators
SNAP4CT.org Online Platform	<p><del>Formative: Client and site availability to electronic devices and receptiveness to receive or deliver nutrition education electronically. Assess the interest and engagement of SNAP Ed eligible SNAP4CT.org users through online and in-person satisfaction surveys as deemed appropriate to test/develop materials. (See evaluation.)</del></p> <p><del>Process: Google Analytics will track key weekly and monthly website metrics including;</del></p> <ul style="list-style-type: none"> <li>• Number of visitors/users, page views, location of user (filtered by CT and outside of CT), location of user by town, and technology used to access site (mobile phone, tablet, desktop computer).</li> <li>• Available social media metrics and the growth/stability in eNewsletter subscribers will also be reviewed on a regular basis. <b>Outcome:</b> Comparison of analytical data with previous years will show changes in use overall and by specific platforms and topics over time. The</li> <li>• <b>P</b>ercent of repeat views and time spent on the site and page will gauge client engagement.</li> </ul> <p><b>Documenting the</b> Number of entities that incorporate SNAP4CT social media into their food, nutrition, and physical activity promotional and educational materials, as well as, <del>Number of entities that include a link to SNAP4CT on their website. will measure partner confidence of SNAP4CT as a source of information for their clients.</del></p>
Husky Reads/ Little City Sprouts	<ul style="list-style-type: none"> <li>• <del>Process: Number of sites, sessions, and clients. Site and teacher satisfaction with program.</del></li> <li>• <b>Impact (Husky Reads):</b> Number/Percent of classrooms with a teacher who reports Husky Reads lessons increase preschool class' a) recognition of MyPlate, b) knowledge of healthy food options, and c) willingness to try new foods</li> </ul> <p><del>Increase in fruit and vegetable identification and liking as measured by a paired comparison of pre-intervention and post-intervention scores from one on one child interviews capturing child's ability to name and willingness to consume specified fruits and vegetables;</del></p>

	as well as ability to correctly identify MyPlate® and identify foods in different food groups. See evaluation section for complete protocol.
Husky Nutrition On-the-Go (Beverage Series)	<ul style="list-style-type: none"> <li>• <b>Process:</b> Number of sites, sessions, and clients. Site and teacher satisfaction with program. Client satisfaction (intercept survey)</li> <li>• <b>Outcome (SSB):</b> Population change in IMB responses pre- and post-intervention. Program previously validated against home beverage inventories, child food records, and a beverage questionnaire based on the information, motivation, and behavior (IMB) Fisher and Fisher model of behavior change.</li> </ul>
Husky Smart Shopping	<ul style="list-style-type: none"> <li>• <b>Process:</b> Number of sites, sessions, client. and train-the-trainer sessions.</li> <li>• Number of / type of collaborative events held at each retail food location;</li> <li>• Number and percent of POP sessions enhanced by program store/vendor incentives for the featured healthy foods, by type of promotion (e.g., such as coupons, discount, ingredient bundle, co-located ingredients, etc.).</li> <li>• Number / percent of farmers' market produce vendors who offer food samples, feature the recipe, or otherwise collaborate to highlight promote the featured produce item of the week.</li> <li>• Number / percent of farmers' market produce vendors display the recipe.</li> <li>• Site and client satisfaction with program (survey).</li> <li>• <b>Impact:</b> Percent of participants who report learning new ideas for preparing specified foods. Percent of participants who report intent or behavior related to specific food resource management skills and/or healthy eating behaviors such as willingness to purchase and use food highlighted in session. UCONN Health IRB 16-165-2.</li> <li>• <b>Outcome:</b> Number of partner sites or systems who made at least one change in placement of healthy foods, decreased promotion of unhealthy foods, implemented incentives in conjunction with SNAP-Ed, or incorporated SNAP4CT information in store promotions.</li> </ul>
Early Childcare, Food, Nutrition, and Physical Activity Education Policy and Practice Program	<ul style="list-style-type: none"> <li>• <b>Process:</b> Participation. Attendance at group sessions (attendance sheets).</li> <li>• Number of small group or one-on-one technical assistance sessions.</li> <li>• <b>Outcome:</b> Change in score for policy comprehensiveness and strength from baseline<sup>124</sup> to post (2016-17 Parent and Staff handbooks) as measured by the UConn Rudd Center WellCCAT (modified).</li> </ul>
Multi-Dimensional, Integrated	<b>Formative:</b> Environmental scan of all ECEs and retail venues who partner with <i>Husky Nutrition</i> ; Number of organizations reporting willingness to adopt new policies, offer incentives or make

<sup>124</sup> Reports submitted to City of Hartford, Division of Families, Children, Youth, and Recreation and City of New Britain, Department of Health and Human Services.

Programming	<p>environment changes.</p> <ul style="list-style-type: none"> <li>• <i>Process</i>: Number and status of partnership plans for each of the following: ECEs, grocery stores and farmers' markets</li> <li>• Number of ECE partner sites with interventions reaching 2 or more of the following levels: 1) child, 2) parent(s) / caregiver(s); 3) ECE environment, 4) local food retail environment</li> <li>• <del>Number of sites with message coordination with SNAP4CT.org, Husky Reads, Little City Sprouts, and Husky Nutrition On the Go.</del></li> <li>• Number / Percent of ECE partner sites engaged in two or more Husky Nutrition programs: Husky Reads, Little City Sprouts, Healthy Beverage Series, Husky Smart Shopping,</li> <li>• Number of partners that incorporate SNAP4CT social media into their food, nutrition, and physical activity promotional and educational materials;</li> <li>• Number of partners that include a link on their website <del>will measure partner confidence of SNAP4CT as a source of information for their clients.</del></li> </ul>
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**Use of Existing Educational Materials:**

*Husky Nutrition* will utilize nutrition education materials from the *Choose My Plate 10 Tips Nutrition Education Series*, *Cooking Matters at the Store*, *Shopping Matters*, as well as, the *Husky Nutrition* evidenced-based curricula on reducing sugar-sweetened beverages in preschool children. For *Husky Reads*, the books used as a foundation for the lessons come from the Food and Nutrition Fun for Preschooler resource list from the USDA Food and Nutrition Resource Center. SNAP4CT.org will use SNAP-Ed Connection and the recipe finder.

The following are **examples** of additional and existing materials *Husky Nutrition* will use:

Title	Author/Source	Languages
Ten Tips Nutrition Education Series	<a href="http://USDA/ChooseMyPlate.gov">USDA/ChooseMyPlate.gov</a>	English, Spanish Large font
Dietary Guidelines Consumer Brochure	<a href="http://UDSA/ChooseMyPlate.gov">UDSA/ChooseMyPlate.gov</a>	English
Recipes, storage tips, seasonal availability	Produce for Better Health Foundation/ <a href="http://fruitsandveggiesmorematters.org">fruitsandveggiesmorematters.org</a>	English ( <i>Husky Nutrition</i> staff can translate to Spanish)
Early Childhood Nutrition: It's Fun to be	Catch.org <a href="https://catch.org/lessons/early-">https://catch.org/lessons/early-</a>	English

Title	Author/Source	Languages
Healthy PreK Garden lessons	<a href="#">childhood-nutrition-its-fun-to-be-healthy-garden-kids</a>	
Recipes	<a href="#">USDA SNAP-Ed Connection</a>	English*
Cooking Matters, Shopping Matters	Share Our Strength	English, Spanish
Eat Smart, Live Strong	USDA/SNAP-Ed Connection	English
Food Safe Families Campaign Toolkit	USDA, FDA, CDC, Ad Council <a href="#">Foodsafety.adcouncil.org</a>	English, Spanish
Sugar Sweetened Beverages Set	<i>Husky Nutrition</i> - NRI <a href="http://www.publichealth.uconn.edu/nricurriculum.html">http://www.publichealth.uconn.edu/nricurriculum.html</a>	English, Spanish
Parenting the Preschooler: Beverages for your preschooler	(University of Wisconsin Extension) <a href="https://fyi.uwex.edu/parentingthepreschooler/healthy-minds-and-bodies/beverages/">https://fyi.uwex.edu/parentingthepreschooler/healthy-minds-and-bodies/beverages/</a>	English, Spanish
Count Up Your Sugar From Juice Drinks “Rethink your Drink”	North Coast Region Champions for change <a href="https://cachampionsforchange.cdph.ca.gov/en/tips/Pages/Rethink-Your-Drink.aspx">https://cachampionsforchange.cdph.ca.gov/en/tips/Pages/Rethink-Your-Drink.aspx</a>	English, Spanish
10 Steps to Help Fill your Grocery Bag through SNAP	<a href="https://www.fns.usda.gov/snap/10-steps-help-you-fill-your-grocery-bag">https://www.fns.usda.gov/snap/10-steps-help-you-fill-your-grocery-bag</a>	English
Eat Better On Us, What Can \$16 Buy	<i>Husky Nutrition</i>	English, Spanish Large font
Recipes and items for <a href="http://www.snap4ct.org">www.snap4ct.org</a>	SNAP <a href="http://snap.nal.usda.gov/">http://snap.nal.usda.gov/</a>	English, Spanish
USDA/ChooseMyPlate.Gov	<a href="http://www.choosemyplate.gov/healthy-eating-tips/ten-tips.html">http://www.choosemyplate.gov/healthy-eating-tips/ten-tips.html</a>	English
Dirty Dozen/Clean Fifteen from the Environmental Working Group (EWG)	<a href="http://foodmatters.tv/articles-1/2012-shoppers-guide-to-pesticides-the-dirty-dozen-clean-15">http://foodmatters.tv/articles-1/2012-shoppers-guide-to-pesticides-the-dirty-dozen-clean-15</a> <a href="http://www.ewg.org/foodnews/">http://www.ewg.org/foodnews/</a>	English

\* recipes added to the SNAP4CT.org website are translated into Spanish

**Development of New Educational Materials:**

*Husky Nutrition* staff do not anticipate developing new educational materials. On occasion *Husky Nutrition* staff may modify materials to ensure that messages are accessible and provide relevant, adoptable options for those participating in direct education. *Husky Nutrition* staff make adaptations in consideration of age and

functional ability, barriers to food access, income, skills, and literacy, as well as culture and language.

## Evaluation Plans

The Center for Population Health evaluation group headed by Dr. Sara Wakai oversees the evaluation efforts of this plan with Erin Havens, MPH, MPA delegated to lead the SNAP-Ed evaluation with the assistance of Dorothy Wakefield, MA, in statistics and data base analysis; Ann Ferris, Ph.D., in program design; and hourly data collectors. These staff can draw upon extensive expertise of social science researchers, statisticians, and doctoral students when needed. Under their guidance, the *Husky Nutrition* evaluation group will continue to develop a more rigorous evaluation framework and data collection and analytical system to guide program development. Where appropriate, the evaluation group will use performance indicators and outcome measures developed and measured by the Center for Population Health for non-SNAP programs such as the CDC-funded 1805 1815 and 1807 programs and the CT Health Care Innovation Model (SIM) projects.

*Continuing Evaluation Programs:* As its contribution to several citywide and neighborhood level childhood obesity prevention efforts in Hartford, CT, in 2020 *Husky Nutrition* will conduct the third round of measuring height and weight in a statistically sound, randomized sampling of children in all the preschools in Hartford, CT. In addition, as part of the formative evaluation for the potential reach of [www.SNAP4CT.org](http://www.SNAP4CT.org), we are conducting a survey of clients on the availability of technology and barriers and enhancers needed to use electronic devices for delivering SNAP-Ed. (UConn Health IRB 18-030-2).

### ***Special Project Evaluation: Husky Reads***

***Name: Husky Reads Evaluation: Measuring changes in MyPlate knowledge and fruit and vegetable recognition and liking.***

Since 1998, UConn undergraduate students have volunteered as part of a service-learning course to deliver *Husky Reads*. Inspired by the nationally accepted American Academy of Pediatrics' program "Reach Out and Read," *Husky Reads* developed into a program promoting health and nutrition habits, and literacy by reading health-oriented books to young children in pediatric and health clinics. A USDA Higher Education Challenge Grant (2005-2010) supported early development of the *Husky Reads'* curriculum and its delivery method. The following protocol is a registered Clinical Trial (NCT03338257) and is approved by UCONN Health Institutional Review Board (IRB 17-069-3)

The *Husky Reads*' curriculum now includes a series of 10 lessons designed to introduce preschool-age children to MyPlate<sup>®</sup> while improving fruit and vegetable literacy. Each lesson includes reading at least one children's book, an activity or game, and food tasting to complement learning objectives related to MyPlate<sup>®</sup> and fruit/vegetable literacy. Undergraduate students enrolled in the *Husky Reads*' service-learning course at UConn, or college students participating in the paid summer internship program, deliver the preschool lessons. Each team of 2-3 undergraduate students visits 2-3 early care classrooms and delivers *Husky Reads*' lessons to preschoolers on a weekly basis. This series targets children at an early age because early childhood is a pivotal time to influence the path towards healthy behaviors and away from obesity. Providing food tastings and increasing exposure to foods like fruits and vegetables is especially relevant because food preferences<sup>125,126</sup> and appetite regulation<sup>127</sup> are developed in early childhood. Early childhood is also an important time for introducing healthy behaviors because once established in childhood obesity often tracks through to adulthood and is difficult to reverse through interventions<sup>128</sup>.

**Type:** Outcome

**Questions:** The purpose of this evaluation is to answer the question:

Does *Husky Reads*, an educational program that has been in existence for over 15 years, increase a preschool child's recognition of MyPlate<sup>®</sup> and food group concepts, and correct identification of and liking of specified fruits and vegetables?

**Approach(es):**

Pilot. In February/March 2017, the investigators conducted pilot testing to adapt the fruit and vegetable preference instrument and protocol developed by Carraway-Stage and colleagues<sup>129</sup> in North Carolina for use in urban areas of Connecticut. Pilot activities included: selecting, testing and modifying the array of different pictures of fruits and vegetables loaded onto a tablet for survey administration; testing the orientation activity; and obtaining IRB approval for the adapted protocol, recruitment

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<sup>125</sup> Mennella, JA. (2014). Ontogeny of taste preferences: basic biology and implications for health. *Am. J. Clin Nutr.* 99:704S-711S doi: 10.3945/ajcn.113.067694. Epub 2014 Jan 22.

<sup>126</sup> Mennella JA, Lukasewycz, LD, Castor SM, Beauchamp GK. (2011). The timing and duration of a sensitive period in human flavor learning: a randomized trial. *Am J Clin Nutr.* 2011: 1019-24... doi: 10.3945/ajcn.110.003541. Epub 2011 Feb 10.

<sup>127</sup> Birch LL, Doub AE. 2014 Learning to eat: birth to age 2 y. *Am J Clin Nutr.* 99(3):723S-8S. doi: 10.3945/ajcn.113.069047. Epub 2014 Jan 22.

<sup>128</sup> Waters E, de Silva-Sanigorski A, Hall BJ et al. (2011) Interventions for preventing obesity in children. *Cochrane Database of Systematic Reviews*, (12): Art. No.: CD001871.

<sup>129</sup> Carraway-Stage V, Spangler H, Borges M, Goodell LS. (2014) Evaluation of a pictorial method to assess liking of familiar fruits and vegetables among preschool children. *Appetite* 75: 11-20.

materials and instrument. In December 2017, investigators began the process of developing the interview tool to measure changes in MyPlate® recognition and food groups concepts.

**Data collection:** The evaluation team has completed two cycles of data collection to measure changes in fruit and vegetable preference. As of October 2017, study participation in the evaluation includes 6 ECE programs, with a total of 320 children from 24 classes participating in pre-test interviews. Information packets were provided to the parent/caregivers of the 359 children eligible for participation in the evaluation. Of these children, 89% completed the pre-test interview. Only 1 parent opted to not have their child participate.

**Design:** The evaluation uses a pre-test/post-test control group design with paired data at the child level to explore whether children who participate in *Husky Reads* have increased odds of correctly identifying, trying, or liking select fruits and vegetables and identifying MyPlate® components. Based on conservative assumptions, we expect that 900 children and 60 classrooms (average of 15 children per class) will provide sufficient power to discern an increase of 10% for correct identification of and 10% for reported liking of the targeted produce. We anticipate that as data are collected, early analyses of pre/post data will allow us to refine the power estimate. We anticipate that a smaller number of classrooms will yield adequate power. Two examples of challenges to estimating power include 1) limited data available on the extent to which Hartford preschoolers correctly identify or like the selected fruits and vegetables; and 2) correct identification of produce items by preschoolers varies depending on the produce item.

The intervention (*Husky Reads*) follows an approved school and parent consent and child assent and participation protocol. Over 60 early childcare centers in Hartford meet eligibility criteria for participation in SNAP-Ed programs. The *Husky Reads* program administration maintains background data on total enrollment, number of classrooms, and child demographics for each program that will allow for matching control and intervention classrooms by child age (3-4 vs. 4-5 year olds) and racial/ethnic composition. All children in the control and intervention classrooms will be eligible for inclusion in the evaluation. Centers enrolled as control sites receive the *Husky Reads* after a hiatus to insure that no children who participated in the control treatment are enrolled when the program is evaluated. Given that the full *Husky Reads* program runs in the fall and spring, each with up to 25 classrooms receiving the program each semester, completing the evaluation is limited by the availability of evaluation staff and not program participation.

The adapted Carraway-Stage *et al.* and MyPlate® evaluation process starts up to 3 weeks before the *Husky Reads* program begins in intervention sites. The evaluation staff conducts an orientation activity to train children for the interview and the next week, collects pre-intervention evaluation data. The interview is in a private space to reduce

peer influence on the responses. Within three weeks of completion of the 10-week intervention, the evaluation team repeats the process. A code kept in the classroom allows for matching the pre/post responses for the same child. Once the post evaluation testing and data integrity check are complete, the evaluation site supervisor will witness the classroom teacher destroy the Subject Key.

**Statistical Analyses:** The evaluation team will use logistic regression to analyze the relationship between participation in *Husky Reads* and two dichotomous dependent variables: correct identification of MyPlate<sup>®</sup> and correct identification of foods in the specified food groups, as well as, the relationship between participation in *Husky Reads* and two dichotomous dependent variables: experience and identification of specified fruits and vegetables. To determine “liking”, we will examine the frequencies of the five (5) possible responses on the liking scale to decide how to combine responses. Depending upon the distribution of responses, we expect to combine into either two or three categories. We will use logistic regression (if data is combined into two (2) categories) to analyze the relationship between participation in *Husky Reads* and “liking” specified fruits and vegetables or a multinomial logistic regression model will be used if data is combined to three (3) categories. For both analyses, the following variables will be considered as possible covariates: child demographics (age group, gender, ethnicity/race, interview identification responses), as well as Early Care Program and Classroom level demographics.

### ***Planned use:***

*Husky Nutrition* will use the data to determine program effectiveness with regard to knowledge gained (identification) and increased willingness to consume target vegetables and fruits, thus confirming or denying the anecdotal evidence for this program. If the program does effect changes in identification and willingness to consume the target produce, then the change in the evidence base for the program will warrant dissemination to the larger SNAP-Ed community.

### ***Prior Evaluation:***

Findings from a prior evaluation suggest the ability of preschoolers to identify blueberries, strawberries, carrots, and broccoli increased significantly after participation in one *Husky Reads* lesson<sup>130</sup>. Although the findings were promising, the evaluation design lacked a control group and relied on a classroom-wide assessment with hands

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<sup>130</sup> Coleman A, Coleman S, Ferris AM. Book-based nutritional literacy effects preschoolers’ nutritional knowledge and willingness to consume fruits and vegetables: 2013 American Public Health Association National Conference, Boston, MA Paper #289287



raised as a response rather than measuring whether the ability to identify the produce items changed for a given child after participation in *Husky Reads*. Therefore, a more thorough evaluation of whether *Husky Reads* helps children learn to identify select fruits and vegetables is still needed. Questions also remain whether *Husky Reads* increases the odds of a child tasting and/or liking select fruits and vegetables.

### **Previous evaluation results**

Child weight surveillance: Hartford: Child weight ages 3-5: In May of 2012, *Husky Nutrition* conducted a baseline assessment of child BMI in the 69 early childcare centers in Hartford where 73% of all children between the ages of 3-5 attend center-based care. As part of an agreement with the City of Hartford supporting childhood obesity prevention programs, *Husky Nutrition* repeated the process in 2016. See <http://www.publichealth.uconn.edu/child-weight-surveillance-preschool-hartford.html> for a copy of the complete report. The percentage of children classified as overweight or obese decreased from 37% in 2012 to 32% in 2016. The average BMI percentile decreased significantly by four percentile points. However, the weight gap between Hispanic/Latino children and other children in Hartford widened in the four years between assessments with 35% of Hispanic/Latino children classified as overweight or obese and 3.9% classified as extremely obese versus 28% of non-Hispanic/Latino children classified as overweight and obese and 2% classified as extremely obese. We will repeat the child weight surveillance in 2020. Other cities and regions: Although not funded by SNAP-Ed, the *Husky Nutrition* team uses data collected and analyzed by our evaluation group in the City of New Britain and in 13 Federally Qualified Health Centers in the Central and Southeastern parts of CT, to help monitor SNAP-Ed progress (<http://www.publichealth.uconn.edu/newbritainschool.html>).

Early childcare policy change: The project outlined in the 2015-2018 program plan was completed and a report will be part of the 2018 annual report.

### ***Use of SNAP-Ed Evaluation Framework:***

*Husky Nutrition* programs are multi-dimensional and partnered with PSE efforts. To some degree, each program targets changes in individual and organizational behavior while engaging individuals, organizations and partnerships to participate. As the program budget does not allow for in-depth evaluation of all programs at all levels, the *Husky Nutrition* evaluation team along with program leadership will formalize our logic model, timeline and evaluation strategy for each listed program. The logic model will include SNAP-Ed evaluation framework priority indicators at the individual and organization level. For this three-year proposal, on the individual level we will measure several intent and behavior change indicators for healthy eating (ST1 and MT2) and food resource management (ST2 & MT2). We will also measure change in readiness and capacity (ST5), as well as adoption of nutrition supports (MT5) within the ECE and food venue settings where we offer programs. In addition, we will keep close track of

the quantity of our partnerships, the meeting and planning processes, and we will summarize our accomplishments (ST8). We would expect that we will amend our subsequent year plans to include more detailed measures for coordinated programs.

## **Coordination of Efforts**

*Husky Nutrition* staff coordinate with and participate in various committees, councils, and work groups across CT to provide expertise and help influence systems and environmental change with regard to policies and implementation to improve diet quality, food access, and nutrition education to low-income and underserved populations in the state. Staff involvement with collaboration and capacity building help ensure that SNAP-Ed resources and planning are incorporated into various statewide and municipal policy initiatives. *Husky Nutrition* involvement with these groups occurs on a quarterly, monthly, or bi-monthly basis as directed by the committee chair or board. Following is a description of collaboration activities that align with *Husky Nutrition* as well as a table of other partnerships and initiatives that *Husky Nutrition* staff participate in regarding food, nutrition, and physical activity policy, systems, and environmental changes in CT. The plan describes initiatives where *Husky Nutrition* provides or may provide more extensive programming in the 2018-2021.

### ***Website/Social Media Coordination of Efforts***

SNAP4CT.org. aides in the coordination of SNAP-Ed contractor programs within Connecticut. The site provides a vehicle for posting and sharing of events and materials to SNAP-Ed eligible populations, program staff, and social service and health providers. Within the SNAP-Ed program, each contractor sends a list of planned activities at the beginning of each quarter to CT-DSS-SNAP, as well as posts all activities on a Google calendar that is on the www.SNAP4CT.org website. This events calendar updates immediately when SNAP-Ed contractors enter their information, allowing for real-time schedule changes and coordination with other contractors.

Although these postings greatly reduce program duplication and program dissemination, they do not address a need for deeper program coordination in service delivery, messaging, and evaluation. To address this opportunity, during FY 2019 the *Husky Nutrition* web/social media team will work with one of the SNAP-Ed contractors (CT-DPH) to strengthen the collaboration and work towards coordinating more messaging and increasing communications with the end user (SNAP participants). Towards the end of FY 2019 and through FY 2020, the team will continue these efforts with one additional contractor (*UConn Husky Sport*) with a concentrated effort on increasing communications with the targeted North End Promise Zone region. In FY 2021, an additional SNAP-Ed contractor will be added and participate in a strategic web communications initiative.

## **Healthy Hartford Hub**

The Healthy Hartford Hub is a proposed mixed-use development site that will include a full-service grocery store alongside health-promoting services, and potential housing or office space. The proposed development will reside in Hartford's North End where residents of the Northeast Partnership area would most likely shop. The Hartford Foundation for Public Giving has provided significant funding for this project. Invest Hartford completed a market and community needs assessment and discussions have started with a possible grocery retailer. The Hartford Food System is organizing a community advisory board that will direct the depth of *Husky Nutrition* involvement with the Healthy Hartford Hub. The location of this proposed development provides a great opportunity for *Husky Nutrition* to work closely with community partners and the new grocery store to better reach the high-risk population in the North End of Hartford with SNAP-Ed. The *Husky Nutrition* staff has initiated discussions with the Healthy Hartford Hub leadership and commits to providing services to this initiative. *Husky Nutrition* can play a significant role bringing SNAP-Ed to the store by implementing *Husky Smart Shopping* direct education for residents, serving as a resource, and coordinating additional program delivery with other CT SNAP-Ed contractors. If this involvement develops as proposed, then *Husky Nutrition* would submit an amendment to this plan that further describes the commitment.

## **SNAP-Ed and ~~SHAPE~~ CDC-funded 1815 and 1807 Activities**

The Center for Population Health, of which *Husky Nutrition* is a part, leads the evaluation of the current (~~SHAPE—~~ CDC 1815 1805) and ~~proposed~~ (CDC – 1807) projects that focus on improving the health of Connecticut children and adults. As such, evaluation frameworks developed for the CT Department of Public Health programs that are integrated with SNAP-Ed will also be used by *Husky Nutrition*. In addition, Center for Population Health staff who implement the "Secrets of Baby Behavior" breastfeeding education program at work and healthcare sites are supervised by *Husky Nutrition* SNAP-Ed leadership.

## **Department of Social Services Unit on Aging and the City of Hartford**

~~*Husky Nutrition* will continue its work with the Department of Social Services Unit on Aging's Elderly Nutrition Programs by conducting the statewide training for the State Area Agencies on Aging and Title III Elderly Nutrition Program educators and assessors in FY 2019.~~

~~Additionally,~~ *Husky Nutrition* educators will implement nutrition education at the North and South End Senior Centers in Hartford (partially funded by the City of Hartford). *Husky Nutrition* educators will provide programs tailored to older adults at senior housing sites and retail food stores in conjunction with other PSE initiatives.

Other group initiatives that support food, nutrition, and physical activity changes with families and young children, and with whom *Husky Nutrition* staff share curriculum and approaches are listed in the table below.

Organization, Committee, Council, or Workgroup	Type of Involvement	Husky Nutrition staff involved
CDC-proposed 1807 Grant “Secrets of Baby Behavior” Trainings with CT-DPH and WIC	Implementation Evaluation	S. Furbish, M. Traub, M. Belyea (contract dietitian – not funded by SNAP-Ed)
City of Hartford, Departments of Health and Human Services and Children, Families, Youth, and Recreation	Implementation, Technical Assistance and Consulting Evaluation	A. Ferris, S. Furbish
City of Hartford Food Policy Advisory Council	Attendee	S. Furbish
Connecticut Children’s Medical Center - Hartford Childhood Wellness Alliance	Member, Advisory group	S. Furbish, A. Ferris,
Community Health Network of CT, Cooking Matters	Implementation	S. Furbish, C. Quesada (training team)
CT-DSS, Department of Social Services Unit on Aging	Implementation – training	C. Quesada
CT Early Childcare Food, Nutrition, and Physical Activity Planning Committee (CT-DPH organized) Continuance depends on receipt of CDC funding.	Member	E. Havens, A. Ferris,
CT Food System Alliance	Member	A. Ferris, S. Furbish
Foodshare	Coordinating SNAP4CT social media and programming	M. Traub. S. Coleman
Grow Windham	Coordinating programming and SNAP4CT.org dissemination	S. Coleman, M. Traub
Hartford Food System	Coordinating programming, staffing, and funding Curriculum development	A. Ferris, S. Furbish

Organization, Committee, Council, or Workgroup	Type of Involvement	Husky Nutrition staff involved
Opportunity Knocks Middletown	Coordinate programming and SNAP4CT.org dissemination	S. Furbish
New Britain Health Department Obesity Study of Children - Yearly Monitoring of Childhood Obesity and Health Issues.	Evaluation and Surveillance (not funded by SNAP-Ed)	D. Wakefield, E. Havens
State of CT Department on Aging	Consultation and training	S. Furbish, C. Quesada
University of Connecticut, Community Engaged Health Core Group	Members	A. Ferris, S. Furbish
University of Connecticut, Obesity research interest group	Member	A. Ferris
Voices for Healthy Kids, American Heart Association	Founding Partners	A. Ferris, S. Furbish

## Template 3: SNAP-Ed Staffing Plan

Staffing 2020

**Project Name:** Husky Nutrition Programs UConn Health

FY 2020

Position Title Attach statement of work listing SNAP-Ed related job duties for each position	FTEs charged to SNAP-Ed Attach definition of FTE and basis for calculations	Percentage of SNAP-Ed Time Spent on Management/ Administrative Duties	Percentage of SNAP-Ed Time Spent on SNAP-Ed delivery. Include all approaches described in Guidance Section 1	SNAP-Ed Salary, Benefits, and Wages Federal dollars only
Director	.20 FTE	5%	Approach 2 – 60% Approach 3 – 35%	\$ 34,618.81
Assistant Director	.96 FTE	30%	Approach 1 – 5% Approach 2 – 60% Approach 3 – 5%	\$147,123.12
Nutrition Educator – Web/Social Media - RD	.57 FTE	10%	Approach 1 – 55% Approach 2 – 35%	\$71,160.92
Nutrition Educator - RD	1.0 FTE	3%	Approach 1 – 62% Approach 2 – 35%	\$128,592.21
Nutrition Educator – Non-RD	1.0 FTE	15%	Approach 1 – 25% Approach 2 – 60%	\$128,592.21
Nutrition Educator - RD	.75 FTE	3%	Approach 1 – 62% Approach 2 – 35%	\$ 85,362.52
Nutrition Educators – Per diem RDs	.32 FTE	1%	Approach 1 – 99%	\$ 21,854.40

Position Title Attach statement of work listing SNAP-Ed related job duties for each position	FTEs charged to SNAP-Ed Attach definition of FTE and basis for calculations	Percentage of SNAP-Ed Time Spent on Management/ Administrative Duties	Percentage of SNAP-Ed Time Spent on SNAP-Ed delivery. Include all approaches described in Guidance Section 1	SNAP-Ed Salary, Benefits, and Wages Federal dollars only
Nutrition Educators - Students	1.18 FTE	1%	Approach 1 – 99%	\$45,156.48
Evaluation/Support	.452 FTE	100%	0%	\$63,124.02
			Total Staffing Budget: Enter total for all salary, benefits, and wages from Federal dollars here.	\$725,584.69

1 FTE = 2080 Hours per year

## SNAP Ed related job duties 2020

**Director:** (.20 FTE – 1 person at fringe rate 16%) responsible for grant coordination, partner relationships/collaboration/capacity building, fiscal oversight, program integrity, early care and education policy and practices review (PSE) and evaluation.

**Assistant Director:** (.96 FTE – 1 person at fringe rate 74%) coordinate the Husky Nutrition Programs providing daily program management, personnel supervision, training and ensuring program integrity, program reporting (EARS/quarterly and annual reports), as well as direct program delivery, coordination of programming and PSE at early care and education sites, collaboration in state capacity building with community groups, state and local leaders.

**Nutrition Educators-RD:** (2.32 FTE – 3 people at fringe rate 74%) provide and coordinate direct education for the SNAP participants, active participant in parent engagement at WISH School with Husky Sport, SNAP4CT.org, assist and train non-RD nutrition educators; collaboration in state capacity building with the State and local leaders and PSE interventions with retail food outlets, scheduling and supervising per diem and student employees to support direct education.

**Nutrition Educator-non RD:** (1.0 FTE – 1 person at fringe rate 74%) coordinate the delivery of direct programming for Husky Reads and Healthy Beverages, Husky Nutrition On-the-Go and Husky Healthy Shopping at retail stores and Farmers Markets by student nutrition educators.

**Nutrition Educators per diem (RD and non-RD):** (.32 FTE at a fringe rate of 16% – a fluctuating number of professional educators, RD and non-RD) - provide direct delivery of nutrition education for Husky Reads, Husky Nutrition On the Go, Husky Smart Shopping and SNAP4CT.org.

**Nutrition Educators – students:** (1.18 FTE a fluctuating number of student para-professionals workers at fringe rate 16%) – provide direct delivery of nutrition education for Husky Reads, Husky Nutrition On-the-Go, Husky Smart Shopping and SNAP4CT.org.

**Evaluation / Support:** (.452 FTE - 1 person (E. Havens) for 12 months .40 FTE at 74% fringe and 1 person (Wakefield) who will work for 4.8 hours for the month of October (FTE equivalent of .002307692 with a fringe rate 74%) and (Wakefield) .05 FTE – 1 person for 11 months at fringe rate 16%). Responsible for program evaluation framework, instrument development, data analysis, EARs database management and



report writing. Wakefield will work at her normal salary for the month of October and then will be retiring in November and will return to work at a reduced salary and lower fringe rate.

**FTE Basis:** Full-time equivalents are calculated using the standard of 2080 hours worked per year (8 hours per day x 5 days per week x 52 weeks per year.)

## Salary & Fringe 2020

### Project Title: Husky Nutrition Programs at UConn Health

#### DIRECT PROGRAM STAFF – Fiscal Year 2020

##### (a) Program Salaries

<u>Position/Name</u>	<u>Annual Salary</u>	<u>No. of Persons</u>	<u>% funded in this contract (FTE)</u>	<u>Salary</u>
Director/Ferris	\$149,219.00	1	.20	\$29,843.80
Asst Director/Furbish	\$88,076.58	1	.96	\$84,553.52
NutEd RD/Web/ Traub	\$71,749.26	1	.57	\$40,897.08
Nut Ed RD/ Quesada	\$73,903.57	1	1.00	\$73,903.57
Nut Ed non-RD/Coleman	\$73,903.57	1	1.00	\$73,903.57
Nutr Ed RD/O'Hare	\$65,411.89	1	.75	\$49,058.92
Eval Support/Havens	\$82,906.72	1	.40	\$33,162.69
Eval Support/Wakefield**	\$114,088.00	1	4.8 hrs -1 month FTE .00230769	\$263.28
Eval Support/Wakefield post retire	\$85,566.00	1	.05	\$4,278.30
Per diem RD/nonRD	\$58,875.00	tbd	.32	\$18,840.00
Nut Ed students	\$32,989.83	tbd	1.18	\$38,928.00

**Total program Salary amount from section (a)**

**\$447,632.73**

##### b) Program Fringe Benefits

<u>Position/Name</u>	<u>Fringe %</u>	<u>Total Fringe</u>
Director/Ferris	16%	\$4,775.01
Asst Director/Furbish	74%	\$62,569.60
Nut Ed RD/Web Traub	74%	\$30,263.84
Nut Ed RD/Quesada	74%	\$54,688.64
Nut Ed non-RD/Coleman	74%	\$54,688.64
Nut Ed RD/O'Hare	74%	\$36,303.60
Eval Support/Havens	74%	\$24,540.39
Eval Support/Wakefield**	74%	\$194.83
Eval Support/Wakefield retiree rehired hourly paid	16%	\$684.53
Nutr Ed students/tbn	16%	\$3,014.40
Per diem RD/nonRD/tbn	16%	\$6,228.48

**Total Fringe amount combined from section (b)**

**\$277,951.96**

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**Total Program Salary and Fringe**

**(total amount from section (a) & (b) combined)**

**\$725,584.69**

\*\* Wakefield will work for 4.8 hrs during the month of October then will be retiring on November 1st so her salary and fringe rate are reduced. FTE is calculated based on an annual number of hours equal to 2080 hrs/year. FTE is: 0.002307692

## Template 4: SNAP-Ed Budget Information by Project

### Information & Budget by Project 2020

#### Section A. Budget Summary for Sub-Grantee

***Name of sub-grantee: Husky Nutrition Programs at UConn Health***

***Total Federal funding, grant:***

***Fiscal Year 2020 - \$970,378 + Carry-over \$ 35,852.25***

***Description of services and/or products:***

The *Husky Nutrition* programs, SNAP-Ed programs managed by UConn Health, engage Connecticut residents living in poverty in food, nutrition, and physical activity programming, policy development, environmental change, and evaluation (<http://publichealth.uconn.edu>). This plan outlines the individual program initiatives to reduce obesity and chronic disease with particular focus on reaching families of young children in early childcare and food retail sites with our direct education program efforts and to support, not only our programs, but the state-wide SNAP-Ed education efforts with the SNAP4CT.org social media platform.

*Husky Nutrition* program educators and staff will deliver direct nutrition education (Approach One) to individuals and groups of SNAP recipients and eligible in Connecticut in conjunction with multi-level PSE interventions and collaborations (Approaches Two and Three) with targeted complementary community sites and organizations. Educators and staff will conduct program evaluation, and utilize community and public health approaches to work with early care and education sites, food retailers, statewide and municipal leaders to improve nutrition for the public at large. Specific details of the plan are outlined in the *Husky Nutrition* Program Plan.

***Cost of specific services and/or products:***

***Fiscal Year 2020 - \$970,378 + Carry-over 35,852.25***

## Section B. Project Costs

*Federal Fiscal Year: 2020*

*State: CT*

*Sub-grantee Name: Husky Nutrition Programs at UConn Health*

Expenses	Carry-in from Previous FY	Current FY Budget	Non-Federal Support
Salary/Benefits	\$ 28,454.17	\$697,130.52	
Contracts/Sub-Grants/Agreements		\$ 9,999.00	
Non-Capital Equipment/Supplies/Purchase Services		\$ 22,515.42	
Materials		\$ 14,681.83	
Travel		\$ 24,814.50	
Institutional Memberships		\$ 1,000.00	
Total Direct Costs	\$ 28,454.17	\$770,141.27	
Indirect Costs (Indirect Cost Rate= 26%)	\$ 7,398.08	\$200,236.73	
Total Federal Funds	\$ 35,852.25	\$970,378.00	Leave blank
<b>Total Federal Funds Including Unobligated Balance from Previous FY</b>	Leave blank	\$1,006,230.25	Leave blank
Estimated Funds Carry-over from Current FY to Next FY, if any	Leave blank		

Signature of Responsible Official: *Tracy Root (electronically signed)*

Date: 6/14/19

## Budget narrative:

**Salary/Benefits: \$725,584.69**

**Director:** (.20 FTE – 1 person at fringe rate 16%) responsible for grant coordination, partner relationships/collaboration/capacity building, fiscal oversight, program integrity, early care and education policy and practices review (PSE) and evaluation.

**Assistant Director:** (.96 FTE – 1 person at fringe rate 74%) coordinate the Husky Nutrition Programs providing daily program management, personnel supervision, training and ensuring program integrity, program reporting (EARS/quarterly and annual reports), as well as direct program delivery, coordination of programming and PSE at early care and education sites, collaboration in state capacity building with community groups, state and local leaders.

**Nutrition Educators-RD:** (2.32 FTE – 3 people at fringe rate 74%) provide and coordinate direct education for the SNAP participants, active participant in parent engagement at WISH School with Husky Sport, SNAP4CT.org, assist and train non-RD nutrition educators; collaboration in state capacity building with the State and local leaders and PSE interventions with retail food outlets, scheduling and supervising per diem and student employees to support direct education.

**Nutrition Educator-non RD:** (1.0 FTE – 1 person at fringe rate 74%) coordinate the delivery of direct programming for Husky Reads and Healthy Beverages, Husky Nutrition On-the-Go and Husky Healthy Shopping at retail stores and Farmers Markets by student nutrition educators.

**Nutrition Educators per diem (RD and non-RD):** (.32 FTE at a fringe rate of 16% – a fluctuating number of professional educators, RD and non-RD) - provide direct delivery of nutrition education for Husky Reads, Husky Nutrition On the Go, Husky Smart Shopping and SNAP4CT.org.

**Nutrition Educators – students:** (1.18 FTE a fluctuating number of student para-professionals workers at fringe rate 16%) – provide direct delivery of nutrition education for Husky Reads, Husky Nutrition On-the-Go, Husky Smart Shopping and SNAP4CT.org.

**Evaluation / Support:** (.452 FTE - 1 person (E. Havens) for 12 months .40 FTE at 74% fringe and 1 person (Wakefield) who will work for 4.8 hours for the month of October (FTE equivalent of .002307692 with a fringe rate 74%) and (Wakefield) .05 FTE

– 1 person for 11 months at fringe rate 16%). Responsible for program evaluation framework, instrument development, data analysis, EARs database management and report writing. Wakefield will work at her normal salary for the month of October and then will be retiring in November and will return to work at a reduced salary and lower fringe rate.

**FTE Basis:** Full-time equivalents are calculated using the standard of 2080 hours worked per year (8 hours per day x 5 days per week x 52 weeks per year.)

**Contracts/Sub-Grants/Agreements: \$9,999**

**Sub Contract to Hartford Food Systems: \$9,999**

*Husky Nutrition Programs* will sub-contract to Hartford Food System to conduct the Little City Sprouts program at preschools within the City of Hartford. Sub-contract will include:

Program Leader— 260 hours @ \$28.50/hour= \$7,410

Program Assistant – 30 hours @ \$21.30/hr = \$639

Total Personnel costs = \$8,049

Supplies and materials for 25 sessions, (\$30/session for up to 25 children) \$750

Materials to construct garden beds - \$600

Travel or virtual field trips – 2 trips @ \$300/trip (70 Children maximum) = \$600

Total Other costs= \$1,950

Total Direct Costs= \$9,999

**Non-capital equipment/supplies/purchase services/purchase services: \$22,515.42**

- Adobe Creative Cloud subscription (\$200 per year) for snap4ct.org website development
- Weebly web hosting (\$195 year)
- Weebly Grow package (\$300 year)
- Piktochart subscription (\$40 per year) for pictogram creation for eNewsletter responses
- Google Ad Words search engine optimization, Facebook boosts, Instagram boosts and You Tube Boost at \$1,250 per month (\$15,000)
- Google Suite Admin package (\$150 per year)
- Hootsuite for newsletter creation and for scheduling posts on social media (\$125 per year)
- Instagram links - LinkMyPhoto (\$60 per year)
- Replacement PC for the Storrs office to conform to data security requirements at University - \$800

- 4 data plans for iPads for electronic data collection and for displaying snap4ct.org website and signing up new subscribers (SNAP recipients) for eNewsletters (\$1,547.64 per year)
- ESHA Food Processor for nutrient/recipe analysis (\$600)
- secure records storage at Iron Mountain (\$84 per year)
- postage (\$250)
- equipment maintenance, IT charges for back-up and MPS/telecommunications charges (\$1,740)
- Stationary supplies (\$1,423.78)

**Materials: \$14,681.83**

- Food and paper goods/food safety gloves, aprons for food tastings to support Husky Reads in preschools, food demonstration costs at parent workshops and Husky Smart Shopping (\$7,000)
- Incentives for health fairs, farmers markets, Husky Smart Shopping and Husky Reads direct education, Husky Nutrition On-the-Go at Preschools (\$5,475)
- Supplies for reproduction of educational materials to support programs collaborating sites and for promotion of SNAP4CT website to SNAP participants (\$1,981.83)
- Bi-annual staff professional development (\$225)

**Travel: \$24,814.50**

**In-State Travel: \$3,542.50**

In-state travel to reimburse staff for work-related round trip travel to community sites for nutrition education programming and for meetings with municipal, state and local community partners for capacity building and policy change efforts. Current estimations based on travel history: 6,107.75 miles @ 0.58/mi.

**Van Rental and Gas: \$18,675.00**

One van rental is through CT Dept. of Administrative Services is \$650 per month (\$7,800) plus fuel of \$175 per month for 12 months. (\$2,100)

Rental charge for two 7-passenger vans from May – August (13 weeks) based at \$675 per week (includes fuel charge) – (\$8,775)

**Out-of-State Travel: \$2,597**



Travel for one person to attend the annual Society of Nutrition Education and Behavior Conference to be held in San Diego, CA July 19 - 21, 2020

Registration: \$125, Hotel: \$1,350, Air \$525, meal per diem: \$522, Taxi: \$75

***Institutional Membership: \$1,000***

Membership to the Society for Nutrition Education and Behavior (SNEB) for RDs in order to participate in webinars and discussion groups and to share or learn about best practices for providing Nutrition Education and PSE related activities as they pertain to the SNAP population and communities served.

***Building space: N/A***

***Maintenance: N/A***

***Equipment and other capital expenditures: N/A***

***Total direct costs: \$798,595.44***

***Total indirect costs: \$207,634.81***

Indirect Cost rate = 26%

***Total federal funds: \$1,006,230.25***

***Estimated funds carry-over from current FY to next FY, if any: \$35,852.25***

## **Section C. Travel**

### ***In-State Travel***

#### ***Travel Purpose:***

Nutrition educators and staff travel within Connecticut to deliver direct nutrition education at community sites, to meet with community sites to conduct policy review and to do physical site assessments, and to attend meetings with state, municipal and local community leaders for policy/systems/environmental (PSE) change initiatives to support achievement of the State SNAP-Ed goals and objectives.

Travel within CT is required in order for nutrition educators and staff to complete work directly associated with achievement of the SNAP-Ed goals and objectives. Round trip travel reimbursement will occur for business-related expenses supporting direct education, PSE change initiatives, attending meetings for collaboration and state partnership and capacity building activities.

***Travel destination (city, town or county or indicate local travel):***

Local travel from Husky Nutrition offices in Farmington, Hartford, Storrs and Norwich/New London to the community sites for direct programming and PSE efforts and to meetings with collaborators and DSS within CT.

***Number of staff traveling:***

Six (6) *Husky Nutrition* staff (Director, Assistant Director, 4 Community Based Nutrition Educators (RD and non-RD), 2 Evaluation/Support staff) and 2 - 3 per diem RD and non-RD nutrition educators. Total estimated travel within CT is 6,107.75 miles per year.

*Husky Nutrition* rents three (3) vans used for additional travel throughout the year to transport the per diem and non-RD nutrition educators to and from community sites where educators conduct direct nutrition.

***Cost of travel for this purpose:***

**Mileage Reimbursement \$3,542.50**

In state travel reimburses staff for work related round trip travel to community sites for nutrition education programming and for meetings with municipal, state and local community partners for capacity building and policy change efforts. Total estimated travel (based on historical data) within CT is for 6,107.75 miles @ 0.58/mile.

**Van Rental and Gas: \$18,675**

One van rental is through CT Dept. of Administrative Services is \$650 per month plus fuel of \$175 per month for 12 months. (\$9,900)

Rental charge for two 7-passenger vans from May – August (13 weeks) based at \$675 per week (includes fuel charge) – (\$8,775)

**Total In-State Travel Cost: \$22,217.50**

**Out-of-State Travel: \$2,597**

**Travel Purpose:** Justification of need for travel, including how attendance will benefit SNAP-Ed

Out of state travel is being requested for one (1) staff member to attend and be an active participant at the Society of Nutrition Education and Behavior annual conference to be held in San Diego, CA, July 19 - 21, 2020. The annual meeting and conference provide the most prominent opportunities for presentation of new program initiatives in food, nutrition and physical activity promotion and sharing best practices for promoting behavior changes.

This meeting will provide an opportunity to gain valuable insight into best practices for evidence-based interventions in the arena of nutrition education and physical activity promotion for obesity prevention.

See the program agenda from the 2019 Annual conference as an example of the sessions offered at the conference as the 2020 agenda is not yet available. The agenda may be found at this link: <https://www.sneb.org/2019-programs> .

**Travel destination (city and State):**

The *Husky Nutrition Programs'* staff member will actively participate in the meeting (presentation and/or poster presentation) to share our evidence-based curriculum and evaluation of the direct education programs and PSE efforts with other nutrition education professionals. As well, participation will provide opportunities for us to gain insight into other proven methods and best practices of successful education and policy and systems advocacy to assist with our achievement of the State SNAP Ed goals and objectives.

**Number of staff traveling:**

1

**Cost of travel for this purpose:**

Registration: \$125, Hotel: \$1,350, Air \$525, meal per diem: \$522, Taxi: \$75

**Total Out-of-State Travel Cost: \$2,597**

**Section B. Project Costs**

Federal Fiscal Year: 2020

State: CT

Sub-grantee Name: Husky Nutrition Programs at UConn Health

Expenses	Carry-in from Previous FY	Current FY Budget	Non-Federal Support
Salary/Benefits	\$ 28,454.17	\$697,130.52	
Contracts/Sub-Grants/Agreements		\$ 9,999.00	
Non-Capital Equipment/Supplies/Purchase Services		\$ 22,515.42	
Materials		\$ 14,681.83	
Travel		\$ 24,814.50	
Institutional Memberships		\$ 1,000.00	
Total Direct Costs	\$ 28,454.17	\$770,141.27	
Indirect Costs (Indirect Cost Rate= 26%)	\$ 7,398.08	\$200,236.73	
Total Federal Funds	\$ 35,852.25	\$970,378.00	Leave blank
<b>Total Federal Funds Including Unobligated Balance from Previous FY</b>	Leave blank	\$1,006,230.25	Leave blank
Estimated Funds Carry-over from Current FY to Next FY, if any	Leave blank		

Signature of Responsible Official: *Jeanne M. Kost*

Date: *6/14/19*

## Project 5 - Husky Sport

## Template 2: SNAP-Ed State Goals, Objectives, Projects, Campaigns, Evaluation, and Collaboration

### Reporting Progress on State-Level Goals and Objectives

Husky Sport will continue to collect evaluation data as outlined in the FY19-21 SNAP-Ed plan. A mixture of pre-test post-test surveys and focus groups with youth participants is set to be facilitated throughout the year (i.e. pre-test post-test administered before and after each nutrition and physical activity themed cycle, or 3-4 weeks; focus groups at end of December and beginning of May). Findings are shared with community partners and state-wide project partners to inform continued adjustments and improvements. Administrative costs are managed by certified personnel and guidelines outlined from the Office of Sponsored Programs and the Neag School of Education at the University of Connecticut.

### Description of Project/Interventions

***Project/Intervention Title: University of Connecticut: Husky Sport***

#### ***Related State Objective(s):***

At the end of each SNAP-Ed Program year, an additional 10% of SNAP-Ed participants will demonstrate increased knowledge about making healthy food choices in accordance with the Dietary Guidelines for Americans 2015 including one or more of the following:

- 1.1 Increase reported whole fruit consumption by at least one-half portion,
- 1.2 Increase reported vegetable consumption by at least one-half portion,
- 1.3 Increase reported consumption of whole grains and decrease reported consumption of refined grains,
- 1.4 Increase reported consumption of fat-free or low-fat dairy, including milk, yogurt, cheese, and/or fortified dairy alternatives and a decrease reported consumption of full fat dairy or dairy alternative,
- 1.5 Decrease reported consumption of saturated fat by exchanging one serving of food high in saturated fat for a lower saturated fat option,
- 1.6 Decrease reported consumption of salt and sodium containing foods
- 1.7 Decrease reported sugar-sweetened beverages (SSB) consumption by substituting water for at least one SSB selection per day, Match DGA – Decrease reported consumption of added sugars?
- 1.8 Demonstrate increased knowledge and skills about selecting healthy foods as demonstrated by at least one of the following activities: label reading and/or identification of healthy food choices from an array of foods,
- 1.9 Demonstrate increased knowledge and skills about preparing healthy foods by at least one of the following activities: ability to read and follow directions on a

recipe, ability to describe how to properly clean and store fresh produce, and/or demonstration of newly acquired cooking skills that include substituting healthier ingredients in recipes.

Objective 2: Increase physical activity among population groups who are receiving or eligible to receive SNAP benefits.

At the end of each SNAP-Ed Program year, an additional 10% of SNAP-Ed participants will demonstrate increased knowledge and application of that knowledge with regard to physical activity including one or more of the following:

- 2.1 Demonstrate increased knowledge about recommended levels and health benefits of physical activity.
- 2.2 Report practices utilized to increase daily physical activity.

Objective 3: Support comprehensive, multi-level interventions and community and public health approaches to shape and facilitate healthy food and physical activity choices among those receiving or eligible to receive SNAP benefits.

At the end of each SNAP-Ed program year,

- 3.1 SNAP-Ed contractors will support coordinated systems planning and will integrate program activities into at least one additional neighborhood, municipality, agency, or statewide health promotion initiative.
- 3.2 SNAP-Ed contractors will develop and execute a coordinated program with at least one additional federally funded program (e.g. Commodity Foods, Child Nutrition Programs, Farmer’s Market and retail incentive programs, WIC, CDC)
- 3.5 SNAP-Ed contractors will provide training on the development and delivery of culturally appropriate, evidence-based food, nutrition, and physical activity education to at least five additional provider groups (e.g. Area Agency on Aging resource coordinators, early childcare staff, teachers).

***Audience:***

Specify the audience category as explained in Section A: Identifying and Understanding the Target Audience and other relevant characteristics of the proposed audience (e.g., age, gender, etc.). Describe how the project will focus education on the SNAP target audience.

<b>UConn Husky Sport</b>	<b>SNAP Target Audience(s)</b>
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<b>Ready, Set, Read!</b>	
Wish School, grades Pre K-2	Youth ages 4-7, family members, and classroom teachers
<b>Husky Growth</b>	
Wish School, grades 3-5	Youth ages 8-10, family members, and classroom teachers
<b>Husky Move</b>	
Wish School, grades 3-5	Youth ages 8-15, family members, and classroom teachers
<b>School Culture of Health</b>	
Wish School, grades PreK-5	Youth ages 4-10
<b>Families with School Culture of Health</b>	
Wish School, Family members of grades PreK-5	Adult family members of youth ages 4-10
<b>After School Programs</b>	
Hartford Catholic Worker, Wish School Programs (The Village for Families and Children)	Youth ages 5-18



<b>Saturday Program</b>	
Hartford Catholic Worker and Salvation Army	Youth ages 5-18
<b>Professional Development</b>	
Storrs, CT and Hartford, CT	Husky Sport professional and student staff

***Food and Activity Environments:***

Youth at the school and community-based organizations in which Husky Sport operates are in the North End neighborhoods of Hartford. In 2019-2020 (FY20), Fred D. Wish Museum School, where Husky Sport currently operates, will restructure to a Pre-K - 5 elementary school. The student population at Wish School will decrease by 75-100 students as Wish students in grades 6-8 will transition to the new Thurman Milner Middle School and Milner students in grades Pre-K-5 will now enroll at Wish School. We report the demographics on the North End as a whole to encompass both the school population as well as youth who attend after school and weekend programs who do not attend Wish School. Those demographics are as follows:

African Americans	39%
Latinos	59%
Median Household Income	\$19,652
Eligible for Free/Reduced Lunch	87%

Projections of how those numbers will be distributed by grade level will be determined in the FY20 narrative outlined below.

### **Project Description:**

Note how you will implement the program. Include information describing: Behavioral, policy, systems, or environmental changes; key educational messages; how and where services will be delivered, partner organization roles and contributions, duration of project; projected total number of individuals, sites, or systems participating or reached; and for strategies that include social marketing, include the frequency of messages.

Husky Sport includes the following programs: Ready, Set, Read!, Husky Growth, Husky Move, School Culture of Health, Families with School Culture of Health, Afterschool Programs, Saturday Programs, and Professional Development.

The key messages used by Husky Sport focus on promoting healthy lifestyles for school-aged youth keeping in mind the barriers that exist for finding food that are affordable, convenient and nutritious as well as encouraging increased physical activity.

**1. Ready, Set, Read!** — Ready, Set, Read! is entering its 11<sup>th</sup> year. It is modeled after programs like Scholastic's Read and Rise (<http://www.scholastic.com/aboutscholastic/communityreadandrise.htm>) that aim to bring families and community members into schools to support youth literacy development. Husky Sport also works closely with school curriculum specialists and teachers to select appropriate books and plan activities. During the 2019-2020 academic year, Husky Sport will focus the reading efforts at one school with grades Pre-K to 2nd grade. Once per week, students and classroom teachers will visit the Husky Sport classroom to participate in an engaging lesson which includes a specific book that promotes positive nutritional choices and/or emphasizes physical activity. For example, during our agility themed cycle we will read the book "Ready, Steady, Mo" by Mo Farah. This engaging picture book showcases agility skills Farah gained as an Olympic Gold Medalist. To reinforce the physical literacy skill of agility, students will participate in a fun relay-style ladder drill and jump rope activity to deepen their understanding of agility and how that relates to both the character's experience and their own bodies. Husky Sport selects books according to the connections to physical activities and nutrition concepts (see attached).

Youth contacts for Ready, Set, Read! number 6,075 per year (9 classrooms with 25 students each over 27 weeks of the academic year) and 3,150 with parents/adult family members with newsletters & recipe cards (225 people, 14 times - 7 newsletters and 7 recipe cards - per academic year). At the end of each Ready, Set, Read! cycle, students in grades Pre K-2 try a healthy tasting funded by SNAP-Education, that connects to the nutritional theme. SNAP-Education funds a 100% full-time professional staff member (Bellamy-Mathis) to coordinate the Ready, Set, Read! Program, as well as partial time from three part time graduate assistants (Fontaine, Hernandez, Gibbs) for program delivery. Responsibilities for this position include: communication with teachers, administrators and parents, managing the development of the Ready, Set, Read! Program curriculum,

facilitating scheduling of lessons, supervising part-time nutrition/physical activity educators to deliver the lessons and activities, and evaluating the effectiveness of Ready, Set, Read!. SNAP-Ed also funds the part-time nutrition/physical activity educators, materials and supplies (including books), and transportation for nutrition/physical activity educators to the sites.

**2. Husky Growth** — The Husky Sport Husky Growth Program is entering its 11<sup>th</sup> year in the Hartford Public Schools.

The Husky Growth curriculum is collaboratively planned between Husky Sport staff and the school curriculum specialists and teachers. Activities align with common core curriculum (<http://www.sparkpe.org/physical-education-resources/common-core/>; <http://www.sde.ct.gov/sde/cwp/view.asp?a=2618&q=320886>).

Once per week, Husky Sport staff members will visit students in each classroom in grades 3-5, spending one 40-minute period with the students and their teacher.

For 15-20 minutes of that period, students will engage in nutrition education, demonstrations, tastings and related enrichment that reinforce healthy nutritional choices. The Husky Growth Program follows a 3-4-week cycle around a specific nutrition theme. For example vegetables:

- Week 1: Students will be introduced to the theme via a physically active pre-test to show the knowledge they have of the theme, then students will learn about foods that fit the MyPlate category and the benefits of eating those foods.
- Week 2: With focus on using your 5 senses to explore some familiar and unfamiliar vegetables, students will use their five senses (tasting, touching, hearing, smelling and finally seeing,) to explore a variety of vegetables.
- Week 3: For a team activity, students work together to identify where certain vegetables are grown - underground, on the ground or on a vine/stalk. Students play a fun team game of Scattergories, identifying vegetables that grow in a certain location during each round of game play.
- Week 4: Food tastings that fit the theme always culminate the end of the cycle. Food tastings could include new vegetables that students have not tried or trying vegetables in ways that they have not tried before i.e. a sliced-vegetable variety cup with hummus or a cucumber dill salad. All students are hands-on in preparing the tasting which motivates students to try the food, as part of Husky Sport's overall goals to get students to participate in the 2-bite challenge, which encourages them to at least try two bites of each food.

The remaining 20-25 minutes will be used for interactive physical activity lessons centered around a physical literacy theme. Outlined is an example of plyometrics as the physical literacy focus:

- Week 1: Introduce and teach fundamentals of plyometrics through a physically active pre-test – explosive and controlled “upward” movements (jumps) and soft landings. Then students practice with Husky Sport staff/volunteers for exercise and learning with a fun small group game of silent jumps and/or taps.
- Week 2: Re-teach and re-practice the same fundamental skills again and play a large group game of helicopter, where students put skills into practice by jumping over a spinning rope and landing softly.
- Week 3: Includes training in plyometrics by using the exercise of squat jumps in a fun and engaging activity of Frogger. Students must hop over moving objects and make their way (while landing silently) to the other side of the carpet.
- Week 4: The physically active post-test will include familiar plyometric exercises as students reveal what they learned about the nutrition theme of vegetables. In three different small groups, relay style, students will engage in a plyometric activity from one point to the next and be asked a nutrition-themed question, which connects both our nutrition and physical activity themes.

Husky Sport will share a monthly newsletter, that summarizes the curriculum, including activities, descriptions of the tastings, and nutrition tips, with teachers and family members in order to increase the integration of nutrition education and the promotion of physical activity both in school and at home. Husky Sport also creates recipe cards for each cycle’s nutrition tasting and sends those home.

The Husky Growth program includes 6,075 contacts per academic year with the youth (25 students per 9 classrooms over 27 weeks) and 3,150 with parents/adult family members with newsletters & recipe cards (225 people, 14 times - 7 newsletters and 7 recipe cards - per academic year).

SNAP-Ed funds a 100% full-time professional staff member (Bellamy-Mathis), who as part of her responsibilities, will manage Husky Growth including communicating with teachers, administrators and parents, designing the curriculum, training part-time nutrition/physical activity educators to deliver the lessons and activities, and evaluating the effectiveness of the Husky Growth Program, as well as partial time from three part time graduate assistants (Fontaine, Hernandez, Gibbs). SNAP-Ed also funds the part-time nutrition/physical activity educators, materials and supplies (including food tastings), and transportation for nutrition/physical activity educators to the sites.

[Example “Husky Growth’ Lesson Plan linked here](#)

**3. Husky Move** — Husky Move was part of Husky Sport’s plan for the first time in 2015-2016. A functional movement program adapted from programming with elite youth soccer athletes (see Cohen, Morgan, Plotnikoff, Callister, & Lubans, 2014). Husky Move is an exercise series that students in **grades 3 through 5 will participate in three times**

**per week.** Programming highlights a variety of sports and physical activities, and provides students with functional movement skills in the areas of strength, balance, agility and plyometrics. Addressing functional movement skills may enhance the ability of children to maintain an active lifestyle and provide them the necessary skills to participate. Failure to incorporate physical activity into daily life and promote the acquisition of basic motor skills is a major barrier of physical activity participation and obesity prevention efforts.

SNAP-Ed funds a 100% full-time professional staff member (Bellamy-Mathis), **a 25% post-doctoral staff member (Mala)**, and part time graduate assistants (**Zuk, Smith, Lockhart**), who will manage Husky Move communication with teachers, administrators and parents, designing the curriculum, training part-time nutrition/physical activity educators to deliver the lessons and activities, and evaluating the effectiveness of Husky Move. SNAP-Ed also funds the part-time nutrition/physical activity educators, materials and supplies, and transportation for nutrition/physical activity educators to the sites.

Youth contacts for Husky Move number **18,225 per year (9 classes, 25 students per class, three times per week across 27 weeks of academic year).**

**Example 'Husky Move' Lesson Plan linked here**

**4. School Culture of Health** — Husky Sport will engage with the Wish School community (students, staff, and partners) with a focus on building a culture of health and wellness through Positive Behavioral Interventions and Supports (PBIS) efforts. With this, the school is preparing for and hosting positive school-wide engagement opportunities for the Wish community to grow consistent school-time efforts that promote nutrition education and physical activity as part of their school culture. Through this engagement across Wish School, Husky Sport (in collaboration with Husky Nutrition Programs as a fellow SNAP-Ed collaborator) will provide additional physical activity and nutrition-related activities at school-wide events which will include earned gym time, recesses, physically active field days, and class-wide healthy tastings.

School Culture of Health contacts will include 4,400 contacts per academic year (400 students plus 40 adults per 1 opportunity per 10 months in academic year).

SNAP-Ed funds a 100% full-time professional staff member (Bellamy-Mathis) and part time graduate assistants (Macaulay and Mata), who will manage School Culture of Health communication with teachers, administrators and students, designing the curriculum, training part-time nutrition/physical activity educators to deliver the lessons and activities, and evaluating the effectiveness of School Culture of Health efforts. SNAP-Ed also funds the part-time nutrition/physical activity educators, materials and supplies, and transportation for nutrition/physical activity educators to the sites.

**5. Families with School Culture of Health** — Wish School is engaging students' families around building an overall culture of health and wellness that can be implemented and reinforced outside of the school community. With this, the school is preparing for and hosting positive in-school and after school engagement opportunities for the Wish School families to grow in physical, mental and nutritional health. As a part of these efforts, Husky Sport (in collaboration with Husky Nutrition Programs as a fellow SNAP-Ed collaborator) will provide additional physical activity and nutrition-related activities at school-wide engagement events involving families. Additional engagement may include family nutrition and/or physical activity workshops, family physical activity events, additional healthy tasting options at previously established family events, and surveying of families around nutrition and physical activity opportunities available in the community.

Families with School Culture of Health contacts will include 1,400 contacts per academic year (100 students plus 40 adults per 1 opportunity per 10 months in academic year) and another 100 contacts with parents/adult family members at PTO meetings (25 people, 4 times per academic year) as part of engagement to increase exposure and involvement with nutrition education and physical activity.

SNAP-Ed funds a 100% time professional staff member (Bellamy-Mathis) and part time graduate assistants (Macaulay and Mata), who will manage Family Engagement with School Culture of Health communication alongside teachers, administrators and students designing the curriculum, training part-time nutrition/physical activity educators to deliver the lessons and activities, and evaluating the effectiveness of Family Engagement as part of School Culture of Health efforts. SNAP-Ed also funds the part-time nutrition/physical activity educators, materials and supplies, and transportation for nutrition/physical activity educators to the sites.

**6. After School Programs (Hartford Catholic Worker House, and Wish School-The Village for Families and Children)** — Husky Sport's After School Program joins each of North End Hartford neighborhood community organizations (Hartford Catholic Worker (HCW) 3 days per week, Wish School-The Village for Families and Children 2 days per week) for 90 minute sessions to deliver nutrition education and physical activity. The HCW program enrolls approximately 30 youth in grades Kindergarten-8th per session, and at Wish School - The Village for Families and Children approximately 30 youth in grades Kindergarten-5th per session. Husky Sport staff members deliver a 10-minute nutrition lesson once per week and a tasting once per month to small groups. The curriculum follows four themes, each which has three weeks devoted to it—fruit and vegetable consumption, whole grains, low fat dairy, and food safety. An example lesson for younger youth (K-2<sup>nd</sup> grade) would be focused on facts about fruit. Students would be divided into small teams working together to separate picture

cards that belong to 1 of 3 possible categories: 1-Fruits that grow on trees 2- Fruits that do not grow on trees 3-Foods that are not fruits. Messages that are reinforced include:

1. Fruits grow in different ways, including on trees.
2. Fruits should be eaten every day.
3. When you eat a meal, fruits and vegetables should cover half of your plate.

Students would then be given a tasting of banana slices (tree fruit) and grapes (vine fruit).

Following the lesson, the youth would engage in a related physical activity for the next 30-minute session. In this example, the youth would play Fruit Follow the Leader. A staff member leads the youth by demonstrating that bananas grow on trees (standing with hands above head like a tree) and grapes grow on vines (standing with hands straight out to sides like a vine). The leader calls out different fruits, first slowly while walking then picking up the pace into a jog while the youth follow the leader in identifying how each fruit grows.

In the final 30-minute session, the youth engage in a more rigorous physical activity. Depending on the space available at each site (gym, pool, field, playground), Husky Sport staff lead the youth in a game or activity that requires a high degree of movement and participation. Husky Sport avoids games where youth are “out” or stand for periods of time waiting for a turn. Favorites include ultimate ball or ultimate frisbee with a foam ball and obstacle courses.

Contacts number is 4,050 (30 youth per site, 5 times a week for 27 weeks) during the academic year).

SNAP-Ed funds a part-time professional staff member (Evanovich) who, as part of his responsibilities, manages the development of the After School Program curriculum, facilitates partnerships at each site, supervises part-time nutrition/physical activity educators to deliver the lessons and activities, and evaluates the effectiveness of the After School Program. SNAP-Ed also funds the part-time nutrition/physical activity educators, materials and supplies, and transportation for nutrition/physical activity educators to the site.

**7. Saturday Program (Hartford Catholic Worker and Salvation Army North End Corps)** — Husky Sport also works with the Hartford Catholic Worker(HCW) for their Saturday program. The program runs from 10am-1pm every Saturday and typically anywhere from 30-50 youth ages 5-18 attend. Lunch is served to youth as part of the program. Husky Sport is responsible for the nutritional messages and menu planning around the lunch that volunteers prepare with food donations each week.

Then, the Salvation Army North End Corps operates an afternoon program from 1pm-4pm each Saturday. Husky Sport provides staffing for sport activities for multiple small

groups of youth ages 8-18 who rotate through the gym during the afternoon. Contacts number as many as 2400 (50 youth (Hartford Catholic Worker) and 50 youth (Salvation Army for 24 Saturdays during the academic year).

SNAP-Ed funds a part-time professional staff member (Evanovich) who shares responsibility for managing the Saturday Program partnership, supervising part-time nutrition/physical activity educators to deliver the lessons and activities, and evaluating the effectiveness of the Saturday Program. SNAP-Ed also funds the part-time nutrition/physical activity educators, materials and supplies, and transportation for nutrition/physical activity educators to the site.

**8. Professional Development** — Husky Sport provides extensive staff development, effective strategies for delivering nutrition education and physical activity to youth and their parents and adult family members, teaching methods to engage and hold the attention of youth, and cultural competency through various workshops and presentations. Husky Sport holds 2-day retreats for its professional and part-time staff twice per year (August and January), monthly meetings for part-time nutrition/physical activity educators to come together as a group to discuss issues particular to their roles, and monthly staff development workshops that allow for staff exposure to best-practices in an effort to increase their effectiveness as practitioners and community partners. In addition, Husky Sport provides volunteer trainings to university students to prepare them to effectively assist the part-time nutrition/physical activity educators at the Husky Sport sites.

SNAP-Ed funds portions of professional staff members (DeRosa and Evanovich). As part of DeRosa's responsibilities, she manages the staff development efforts and works with a team of SNAP-Ed funded undergraduate students who assist her in developing and delivering professional development. The team working on professional and staff development work collaboratively with the input of Husky Sport staff to develop the workshop topics, enlist guest experts to lead workshops, plan and deliver their own workshops. DeRosa works to maintain communication with other Husky Programs funded by SNAP-Ed to share best practices and ideas, and is actively involved in the curriculum development for the service learning courses associated with Husky Sport. Evanovich oversees the development of curriculum for service learning courses, teaches multiple sections per semester, and, as such, is responsible for all aspects of course management. As part of these service learning courses, college students are trained to assist Husky Sport's part-time nutrition/physical activity educators in delivering nutrition education and physical activity curricula in Husky Sport's programs. Service learning courses are offered to students at the University of Connecticut through the Department of Educational Leadership, focusing on authentic relationship building in working with SNAP-Ed recipients in Hartford, and developing effective strategies and best practices for delivering nutrition education and physical activity with youth participants and community stakeholders, under the following course sections:



EDLR 1162: Health and Education in Urban Communities (1 credit course; average 15 students per semester / 30 per year)

EDLR 3547: Introduction to Sport-Based Youth Development (4 credit course; average 40 students per semester / 80 per year)

EDLR 3090: Internship with Husky Sport (3 credit course; 5 per semester / 10 per year)

**Evidence Base:**

Provide the name of each project, identify the evidence level, either research- or practice-based, and cite the supporting references. (Refer to the Checklist for Evidence-Based Approaches in Appendix E.

Husky Sport makes use of the evidence-based strategies and interventions in SNAP-Ed Interventions: A Toolkit for States. Husky Sport has also secured additional funding through the Long Foundation, the Ensworth Charitable Trust, Public Allies, and through internal UConn research awards to evaluate programs and publish results.

**Ready, Set, Read!** started in 2008 and is modeled after Scholastic's Read and Rise program (<http://www.scholastic.com/aboutscholastic/communityreadandrise.htm>) which aims to bring families and community members into school to support youth literacy development. Additional collaboration with Husky Nutrition Programs and the evidence-based program, Husky Reads (<http://www.publichealth.uconn.edu/ece.html>), informs program development and implementation.

**Husky Growth** began in 2009 as a collaborative planned curriculum between Husky Sport staff, teachers and the curriculum specialist. It continues to be planned by this group in accordance with the Common Core Standards.

(<http://www.sparkpe.org/physical-education-resources/common-core/>;  
<http://www.sde.ct.gov/sde/cwp/view.asp?a=2618&q=320886>

**Husky Move** is a functional movement program adapted from programming with elite youth soccer athletes (see Cohen, Morgan, Plotnikoff, Callister, & Lubans, 2014).

**School Culture of Health** is grounded in Positive Behavioral Interventions and Supports (PBIS) and expanded upon for Husky Sport using the approach of The Robert Wood Johnson Foundation (RWJF).

**Families with School Culture of Health** is grounded in Positive Behavioral Interventions and Supports (PBIS) and expanded upon for Husky Sport using the approach of The Robert Wood Johnson Foundation (RWJF). Additional tools for family engagement include:

Husky Programs

Cooking Matters

Physical Activity & Physical Literacy

**After School Programs** is grounded in Sport Based Youth Development theory (see Perkins & Noam, 2007) and uses the sports plus model. Sport is seen as the hook to interest youth in taking part in the program, but the learning approach uses nutrition education and general physical activity as the developmental goals, or the “plus.”

**Professional Development** for the Husky Sport staff is grounded in the literature on communities of practice (see Armour, 2010; Bertram & Gilbert, 2011; Wenger, 1998). And, professional development in the service learning courses linked to Husky Sport utilizes a sport-based youth development (SBYD) framework (Perkins & Noam, 2007) in addition to being informed by campus-community partnership literature (Bringle & Hatcher, 2002).

**Key Performance Indicators (KPIs):**

List the key measures/indicators of implementation or performance that you will capture or collect. Identify if these are new measures/indicators not collected in the past. An example of an implementation measure is the number of PSAs delivered in each media market during the intervention. One associated performance indicator might be the percent of people in a media market who report hearing the message.

N/A

**Use of Existing Educational Materials:**

Give the title, author, and description of existing educational materials that will be used in the delivery of the project/intervention. Specify the language(s) in which the materials will be used including English. Indicate whether the materials will be purchased and justify the need and cost.

Husky Sport will utilize nutrition education materials (available in both English and Spanish) from the Cooking Matters, Shopping Matters and Eat Smart, Nutrition.gov, Live Strong curricula, the Choose MyPlate 10 Tips Nutrition Education Series, Physical Literacy. SNAP-Ed Connection and the recipe finder will be used for snap4ct.org.

The following are **examples** of additional existing materials Husky Sport will use:

Title	Author/Source	Languages
Ten Tips Nutrition Education Series	USDA/ChooseMyPlate.gov	English, Spanish Large font

Dietary Guidelines Consumer Brochure	USDA/ChooseMyPlate.gov	English
Recipes	USDA SNAP-Ed Connection	English
Eat Smart, Live Strong	USDA/SNAP-Ed Connection	English
Recipes and items for <a href="http://www.snap4ct.org">www.snap4ct.org</a>	SNAP <a href="http://snap.nal.usda.gov/">http://snap.nal.usda.gov/</a>	English, Spanish

***Development of New Educational Materials:***

- Husky Sport will develop lesson plans for each of its programs using nutrition and physical activities, in addition to previous years’ templates as guides.
- Husky Sport will develop newsletters and recipe cards for monthly tastings during each year of the grant. Newsletters and recipe cards, created for each themed cycle, will be given to students in the Husky Sport program so they may share what they learned and duplicate the recipes with their families.
- Husky Sport will purchase school-age and program-relevant literature to fit cycle themes for the RSR! program.
- Husky Sport will purchase classroom materials and supplies to be used for Husky Sport programming at Wish School.
- Husky Sport will purchase food preparation supplies and sporting equipment to be used by all Husky Sport programs during the school day and after school programs.

**Evaluation Plans**

**A. Ready, Set, Read! Evaluations**

1. Type: Outcome
2. Questions: How did participants’ healthy literacy increase during program? What was impactful in the style of delivery on that knowledge acquisition and retention? How did the ability of Husky Sport staff to build positive relationships with participants impact program effectiveness?

3. Approach: Youth participants complete surveys at the end of the program (May). Grades Pre K-2 complete survey questions via interactive, physically active relay races where students answer only one question at a time, alone from influence of others when it is their turn in the Q & A line. Teachers will complete online (Qualtrics) surveys at the middle (December) and end of the program (May) about perceived and experienced program effectiveness for students.

4. 2019-2020

5. ST1, ST3, ST4, ST6, ST7, MT5, MT6

## **B. Husky Growth Evaluations**

1. Type: Outcome
2. Questions: How was program content acquired and retained by participants? What was impactful in the style of delivery on that knowledge acquisition and retention? How did the ability of Husky Sport staff to build positive relationships with participants impact program effectiveness?
3. Approach: Youth participants will engage in a physically active pre and post-test before and after each 3 or 4 week cycle. Youth participants will also take part in grade-level focus groups at the middle (December) and at the end of the program (May). Teachers will complete online (Qualtrics) surveys at the middle (December) and the end of the programming (May).

4. 2019-2020

5. ST1, ST3, ST4, ST6, ST7, MT5, MT6

## **C. Husky Move Evaluations**

1. Type: Outcome
2. Questions: How did participants' knowledge of body / health increase during program? How did participants' physical literacy increase during program? How was program content acquired and retained by participants? What was impactful in the style of delivery on that knowledge acquisition and retention? How did the ability of Husky Sport staff to build positive relationships with participants impact program effectiveness?
3. Approach: Husky Move will gather physical data (pro agility run, vertical jump, 40 time) at the beginning (September) and at the end of the program (May). Youth participants will also take part in grade-level focus groups at the middle (December) and the end of the program (May). Teachers will complete online (Qualtrics) surveys at the middle (December) and the end of the programming (May).

4. 2019-2020

5. ST3, ST6, ST7, MT3, MT6, LT3

## **D. School Culture of Health**

1. Type: Outcome
2. Questions: How did participants' healthy literacy increase during program? Do students enjoy their time at school in connection with added nutrition education and physical activity incentives? What was impactful in the style of delivery on that knowledge acquisition and retention? How did the ability of Husky Sport staff to build positive relationships with participants impact program effectiveness?
3. Approach: Youth participants will complete surveys at the end of the program (May). Grades PreK-5 will complete survey questions via interactive, physically active relay races where students answer only one question at a time, alone from influence of others when it is their turn in the Q & A line. Youth participants will also take part in grade-level focus groups at the middle (December) and the end of the program (May). Teachers and staff complete online (Qualtrics) surveys at the middle (December) and the end of the program (May) about perceived and experienced program effectiveness for students.
4. 2019-2020
5. ST1, ST3, ST4, ST6, ST7, MT5, MT6

#### **E. Families with School Culture of Health**

1. Type: Outcome
2. Questions: How did adult family member participants' healthy literacy increase during program engagement? Do the adult family members see potential application of learning with their children? What was impactful in the style of delivery on that knowledge acquisition and retention? How did the ability of Husky Sport staff to build positive relationships with participants impact program effectiveness?
3. Approach: Adult family members will complete short surveys upon completion of each session attended (1 per month for 10 months). Select participants will also take part in focus groups at the middle (December) and at the end of the program (May). Adult family members will complete online (Qualtrics) surveys at the middle (December) and the end of the programming (May).
4. 2019-2020
5. ST1, ST3, ST4, ST6, ST7, MT5, MT6

#### **Coordination of Efforts**

***Husky Nutrition and Husky Sport Northeast Hartford Partnership*** – Beginning with the 2019-2021 SNAP-Ed plan, the Husky Nutrition and Husky Sport programs will construct a framework for coordinated messaging, programming, staffing, and evaluation for SNAP-Ed in the 06120 zip code in Hartford, an area of highest need in Connecticut with almost 50% of residents living in poverty. The programs provide parallel activities for many of the same families without intersecting. The Neag School of

Education's Husky Sport Program focuses on school-age children, primarily at Fred D. Wish Museum School (PreK-5th) and neighborhood-based out-of-school programs for that same age group. Husky Nutrition Programs works with children, parents, and providers in early childcare centers. Both programs also work with the myriad city, foundation, university, healthcare, and church-based efforts to improve the well-being of residents and reduce childhood obesity in this highly impoverished area; often duplicating efforts. Over the three year proposed plan, the Husky Sport and Husky Nutrition Programs commit to the coordinated development and implementation of a, multi-level nutrition and physical activity education plan, to:

- serve the needs of the community,
- improve the potential impact of SNAP-Ed within the area,
- evaluate the specific contribution made by SNAP-Ed in meeting the community nutrition and physical activity goals, and
- coordinate with other community partner efforts.

Of particular importance and influence on the development of the coordinated efforts between Husky Sport and Husky Nutrition is the school consolidation plan led by Hartford Public Schools. In Fall 2018, Simpson-Waverly School closed its doors and those students moved to Wish School, and in Fall 2019, Thurman Milner School will do the same. As such, the SNAP-Ed FY20 would be devoted to partnership organization (leadership, staff commitments, training, and coordination of current programs), completion of an asset inventory of programs, retail establishments, and institution in the neighborhood of the expanded Wish School that could support changes in food, nutrition, and physical activity in the neighborhood<sup>[1]</sup>, examination of state and national models to guide our work, and the development of a draft framework for program planning. The focus for FY20 would be on the program development, maintaining community perspective, and the evaluation and potential expansion of the UConn service learning undergraduate and graduate offerings that support university student and faculty participation. The target for FY21 is the initial implementation of the coordinated plan and evaluation framework. Consequently, the following three-year SNAP-ED Plan would include a well-defined and cost effective approach for multi-level SNAP-ED programming in an area of highest need, within Connecticut.

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[1] We would expect to draw on reports produced by the Hartford Promise Zone, Invest Hartford (An RWJ, Culture of Health supported project), the North Hartford Triple Aim Collaborative, Trinity Health sponsored "Wellbeing 360," the UCONN Cities Collaborative, The Hartford Child Wellness Alliance, and the Connecticut Office of Health Strategy to reduce the time needed to produce this inventory.

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## SNAP Ed related job duties 2020

### **Salary/Benefits:**

Executive Director (McGarry) Oversees Directors Team and mission of Husky Sport.

Managing Director (Evanovich) Manages Husky Sport and its external partnership as well as all UConn relationships.

Evaluation Coordinator (DiStefano) Oversees physical activity evaluation across all programs.

Grant Manager (Ward). Works with Directors Team on staffing and travel. Serves as liaison to University Sponsored Programs Services for all grant related matters.

Visiting Professor (DeRosa). Supervises management of logistics of education programs. Assist with staff training. Assist Executive Director and Managing Director.

Assistant Director (Bellamy). Oversees all partnerships with community organizations and schools and program leaders.

L1 and L2 Nutrition Educators (non-RD). (Macaulay, Sheldon, Mata, Hernandez, Gibbs, Fontaine, Lockhart, Duhart, Perez) Direct delivery of nutrition education programming using approved materials and selected sites with flexibility to adapt to varying needs of target audience.

Hourly Staff. Support work of Directors and Nutrition Educators.

## Template 3: SNAP-Ed Staffing Plan

Staffing 2020

Project Name: Husky Sport

Position Title Attach statement of work listing SNAP-Ed related job duties for each position	FTEs charged to SNAP-Ed Attach definition of FTE and basis for calculations	Percentage of SNAP-Ed Time Spent on Management/Administrative Duties	Percentage of SNAP-Ed Time Spent on SNAP-Ed delivery. Include all approaches described in Guidance Section 1	SNAP-Ed Salary, Benefits, and Wages Federal dollars only
<b>Executive Director McGarry</b>	<b>Academic Year .01</b>	<b>95</b>	<b>5</b>	<b>Salary 1108 Fringe 620 Total 1728</b>
<b>Executive Director McGarry</b>	<b>Summer .33</b>	<b>95</b>	<b>5</b>	<b>Salary 12313 Fringe 3534 Total 15847</b>
<b>Managing Director Evanovich</b>	<b>Academic Year .18</b>	<b>75</b>	<b>25</b>	<b>Salary 13623 Fringe 7629 Total 21252</b>
<b>Managing Director Evanovich</b>	<b>Summer .33</b>	<b>75</b>	<b>25</b>	<b>Salary 8401 Fringe 2411 Total 10812</b>
<b>Faculty DiStefano</b>	<b>Summer .25</b>	<b>95</b>	<b>5</b>	<b>Salary 4963 Fringe 1424 Total 6387</b>



Position Title Attach statement of work listing SNAP-Ed related job duties for each position	FTEs charged to SNAP-Ed Attach definition of FTE and basis for calculations	Percentage of SNAP-Ed Time Spent on Management/Administrative Duties	Percentage of SNAP-Ed Time Spent on SNAP-Ed delivery. Include all approaches described in Guidance Section 1	SNAP-Ed Salary, Benefits, and Wages Federal dollars only
<b>Program Administrator Ward</b>	<b>.10</b>	<b>100</b>	<b>0</b>	Salary 6577 <b>Fringe 4854</b> <b>Total 11431</b>
<b>Visiting Professor DeRosa</b>	<b>.11</b>	<b>50</b>	<b>50</b>	Salary 7920 <b>Fringe 5845</b> <b>Total 13765</b>
<b>Assistant Director Bellamy</b>	<b>1.0</b>	<b>20</b>	<b>80</b>	Salary 59808 <b>Fringe 44138</b> <b>Total 103946</b>
<b>L2 Nutrition Educator Macaulay</b>	<b>.50</b>	<b>10</b>	<b>90</b>	Salary 12541 <b>Fringe 2483</b> <b>Total 15024</b>
<b>L2 Nutrition Educator Sheldon</b>	<b>.50</b>	<b>10</b>	<b>90</b>	Salary 12541 <b>Fringe 2483</b> <b>Total 15024</b>
<b>L1 Nutrition Educator Mata</b>	<b>1.0</b>	<b>10</b>	<b>90</b>	Salary 23836 <b>Fringe 4720</b> <b>Total 28556</b>
<b>L1 Nutrition Educator Hernandez</b>	<b>.50</b>	<b>10</b>	<b>90</b>	Salary 11918 <b>Fringe 2359.8333</b> <b>Total 14277.8333</b>

Position Title Attach statement of work listing SNAP-Ed related job duties for each position	FTEs charged to SNAP-Ed Attach definition of FTE and basis for calculations	Percentage of SNAP-Ed Time Spent on Management/ Administrative Duties	Percentage of SNAP-Ed Time Spent on SNAP-Ed delivery. Include all approaches described in Guidance Section 1	SNAP-Ed Salary, Benefits, and Wages Federal dollars only
<b>L1 Nutrition Educator Gibbs</b>	<b>.50</b>	<b>10</b>	<b>90</b>	Salary 11918 Fringe 2359.8333 Total 14277.8333
<b>L1 Nutrition Educator Fontaine</b>	<b>.50</b>	<b>50</b>	<b>50</b>	Salary 11918 Fringe 2359.8333 Total 14277.8333
<b>L1 Nutrition Educator Lockhart</b>	<b>.50</b>	<b>50</b>	<b>50</b>	Salary 11918 Fringe 2359.8333 Total 14277.8333
<b>L1 Nutrition Educator Duhart</b>	<b>.50</b>	<b>50</b>	<b>50</b>	Salary 11918 Fringe 2359.8333 Total 14277.8333
<b>L1 Nutrition Educator Perez</b>	<b>.50</b>	<b>50</b>	<b>50</b>	Salary 11918 Fringe 2359.8333 Total 14277.8333
<b>Student Workers</b>		<b>5</b>	<b>95</b>	Salary 6486 Fringe 279 Total 6765

Position Title Attach statement of work listing SNAP-Ed related job duties for each position	FTEs charged to SNAP-Ed Attach definition of FTE and basis for calculations	Percentage of SNAP-Ed Time Spent on Management/Administrative Duties	Percentage of SNAP-Ed Time Spent on SNAP-Ed delivery. Include all approaches described in Guidance Section 1	SNAP-Ed Salary, Benefits, and Wages Federal dollars only
			Total Staffing Budget: Enter total for all salary, benefits, and wages from Federal dollars here.	<b>Salary 241625</b> <b>Fringe 94579</b> <b>Total 336204</b>

**Salary & Fringe 2020**  
**DIRECT PROGRAM STAFF – Fiscal Year 2020**

**(a) Program Salaries**

<b><u>Position/Name</u></b>	<b><u>Annual Salary</u></b>	<b><u>No. of Persons</u></b>	<b><u>FTE</u></b>	<b><u>Salary</u></b>
Executive Director/Jennie McGarry	\$110,830	1	1.00%	\$1,108
Executive Director/Jennie McGarry Summer	\$36,943	1	33.33%	\$12,313
Managing Director/Justin Evanovich	\$75,684	1	18.00%	\$13,623
Managing Director/Justin Evanovich Summer	\$25,228	1	33.30%	\$8,401
Faculty/Lindsay DiStefano Summer	\$19,853	1	25.00%	\$4,963
Program Administrator/Leah Ward	\$65,765	1	10.00%	\$6,577
Visiting Professor/Danielle DeRosa	\$72,000	1	11.00%	\$7,920
Program Specialist/Patricia Bellamy	\$59,808	1	100.00%	\$59,808
Graduate Assistant – AY L1	\$23,836	1	100.00%	\$23,836
Graduate Assistants - AY L1	\$23,836	6	50.00%	\$71,508
Graduate Assistants - AY L2	\$25,082	2	50.00%	\$25,082
Student Labor	n/a	Multiple	n/a	\$6,486

**b) Program Fringe**

<b><u>Position/Name</u></b>	<b><u>Fringe %</u></b>	<b><u>Total Fringe</u></b>
Executive Director/Jennie McGarry	56%	\$620
Executive Director/Jennie McGarry Summer	28.7%	\$3,534
Managing Director/Justin Evanovich	56%	\$7,629
Managing Director/Justin Evanovich Summer	28.7%	\$2,411
Faculty/Lindsay DiStefano	28.7%	\$1,424

Summer		
Program Administrator/Leah Ward	73.8%	\$4,854
Visiting Professor/Danielle DeRosa	73.8%	\$5,845
Program Specialist/Patricia Bellamy	73.8%	\$44,138
Graduate Assistant – AY L1	19.8%	\$4,720
Graduate Assistants - AY L1	19.8%	\$14,159
Graduate Assistants - AY L2	19.8%	\$4,966
Student Labor	4.3%	\$279

**Total Program Fringe amount combined from section (b)  
\$94,579**

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**Total Program Salary and Fringe (amount from section (a) & (b) combined)  
\$336,204**

## Template 4: SNAP-Ed Budget Information by Project

### Information by Budget & Project 2020

#### Section A. Budget Summary for Sub-Grantee

Contracts/Grants/Agreements for nutrition education services:

NAME OF SUB-GRANTEE: UNIVERSITY OF CONNECTICUT HUSKY SPORT

TOTAL FEDERAL FUNDING, GRANT: \$473,979

DESCRIPTION OF SERVICES AND/OR PRODUCTS: SEE BELOW

COST OF SPECIFIC SERVICES AND/OR PRODUCTS: SEE BELOW

#### Section B. Project Costs

Federal Fiscal Year: 2020

State: Connecticut

Sub-grantee Name: University of Connecticut Husky Sport

Expenses	Unobligated Balances (Carry-over) from Previous FY	Current FY Budget	Non-Federal Support
Salary/Benefits		\$336,204	
Contracts/Sub-Grants/Agreements			
Non-Capital Equipment/ Office Supplies			
Nutrition Education Materials		\$7,200	
Travel		\$32,770	
Building/Space Lease or Rental			
Cost of Publicly-Owned Building Space			
Maintenance and Repair			
Institutional Memberships and Subscriptions			
Equipment and Other Capital Expenditures			
Total Direct Costs		\$376,174	
Indirect Costs (Indirect Cost Rate=26%)		\$97,805	
Total Federal Funds		\$473,979	Leave blank
<i>Total Federal Funds Including Unobligated Balance from Previous FY</i>	Leave Blank		Leave Blank
Estimated Unobligated Balance from Current FY to Next FY, if any	Leave blank		

Signature of Responsible Official: \_\_\_\_\_

Date: \_\_\_\_\_

## Template 4: SNAP-Ed Budget Information by Project

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### Budget narrative:

#### **Salary/Benefits:**

Executive Director (McGarry) Oversees Directors Team and mission of Husky Sport.

Managing Director (Evanovich) Manages Husky Sport and its external partnership as well as all UConn relationships.

Evaluation Coordinator (DiStefano) Oversees physical activity evaluation across all programs.

Grant Manager (Ward). Works with Directors Team on staffing and travel. Serves as liaison to University Sponsored Programs Services for all grant related matters.

Visiting Professor (DeRosa). Supervises management of logistics of education programs. Assist with staff training. Assist Executive Director and Managing Director.

Assistant Director (Bellamy). Oversees all partnerships with community organizations and schools and program leaders.

L1 and L2 Nutrition Educators (non-RD). (Macaulay, Sheldon, Mata, Hernandez, Gibbs, Fontaine, Lockhart, Duhart, Perez) Direct delivery of nutrition education programming using approved materials and selected sites with flexibility to adapt to varying needs of target audience.

Hourly Staff. Support work of Directors and Nutrition Educators.

**Contracts/Sub-Grants/Agreements:** Retain copies of agreements on site.

N/A

#### **Non-capital equipment/office supplies:**

N/A

#### **Nutrition Education Materials:** \$7,200

Food for tastings @ \$1 per child. 9 tastings for Husky Growth Program (120 students) =\$1080.00 and 9 for Ready, Set, Read (175 students)=\$1575.00, and after school site (3 sites with average of 30 children per site) =\$810.00. Total=\$3,465.00 per year

Program materials=Materials for Husky Growth lessons=\$800. Ready, Set, Read! Books=\$450, Materials for Ready, Set, Read lessons=\$935. Materials for Husky Move, School Culture of Health=\$1000. Total=\$3,185.00 per year

Copying and printing supplies (newsletters and recipe cards)=Husky Growth=\$250;  
Ready, Set, Read=\$300. Total=\$550 per year.

**Travel:** \$32,770

Travel for Husky Sport will remain In-State. Per state reimbursement mileage rates (.58/mile) a round trip from Storrs to Hartford is 56 miles or \$32.48 per trip. 1 trip per week for 30 weeks (28 weeks of academic year with prep and evaluation weeks added) per 6 staff members [McGarry, DiStefano, DeRosa, Bellamy, Macaulay, Zuk]=\$974.40x6=\$5,846.40 + 2 trips per week for 30 weeks (28 weeks of academic year with prep and evaluation weeks added) for 1 staff member [Evanovich]=\$974.40x2=\$1,948.80. Total=\$7,795.20

Van transportation for hourly staff and Nutrition Educators to program sites. Rental costs per 7 passenger van from Storrs to Hartford=\$65 + \$.58 a mile for 56 miles RT=\$97.48 per trip, approximately 9 trips a week for 28 weeks of academic year=\$24,564.96 + 4-5 additional trips (at \$97.48 each) during planning weeks, up to the remaining amount \$409.84. Total=\$24,974.80.

**Building/space lease or rental:**

N/A

**Cost of publicly-owned building space:**

N/A

**Maintenance and repair:**

N/A

**Institutional memberships and subscriptions:**

N/A

**Equipment and other capital expenditures:**

N/A

**Total direct costs:** \$376,174

**Total indirect costs:** \$97,805

**Total Federal funds:** \$473,979

**Estimated unobligated balances (carry-over) from current FY to next FY, if any:**



*Total Federal funds including unobligated balance from previous FY:*

**N/A**

## Section C. Travel

### In-State Travel

#### TRAVEL PURPOSE:

All in-state travel is to allow for Husky Sport staff and student volunteers to travel from duty station (Storrs) to Hartford. Travel is necessary to allow for staff to be on site for program delivery.

#### TRAVEL DESTINATION (CITY, TOWN OR COUNTY OR INDICATE LOCAL TRAVEL):

Storrs, CT to Hartford, CT

#### NUMBER OF STAFF TRAVELING:

14 professional and student staff, approximately 120 student volunteers.

COST OF TRAVEL FOR THIS PURPOSE: \$32,770

Total In-State Travel Cost: \$32,770

### Out-of-State Travel

#### TRAVEL PURPOSE:

#### TRAVEL DESTINATION (CITY AND STATE):

N/A

#### NUMBER OF STAFF TRAVELING:

N/A

#### COST OF TRAVEL FOR THIS PURPOSE:

N/A

Total In-State Travel Cost:

N/A

**Template 4: SNAP-Ed Budget Information by Project**

**Section B. Project Costs**

**Federal Fiscal Year:** 2020

**State:** Connecticut

**Sub-grantee Name:** University of Connecticut Husky Sport

Expenses	Unobligated Balances (Carry-over) from Previous FY	Current FY Budget	Non-Federal Support
Salary/Benefits		\$336,204	
Contracts/Sub-Grants/Agreements			
Non-Capital Equipment/ Office Supplies			
Nutrition Education Materials		\$7,200	
Travel		\$32,770	
Building/Space Lease or Rental			
Cost of Publicly-Owned Building Space			
Maintenance and Repair			
Institutional Memberships and Subscriptions			
Equipment and Other Capital Expenditures			
Total Direct Costs		\$376,174	
Indirect Costs (Indirect Cost Rate=26%)		\$97,805	
Total Federal Funds		\$473,979	Leave blank
<b>Total Federal Funds Including Unobligated Balance from Previous FY</b>	Leave Blank		Leave Blank
Estimated Unobligated Balance from Current FY to Next FY, if any	Leave blank		

Signature of Responsible Individual: J. Johnson

Date: 8/19/19

Jennifer Johnson  
Associate Director  
Sponsored Program Services

Project 6 - UConn School and Family-Based SNAP-Ed

## Template 2: SNAP-Ed State Goals, Objectives, Projects, Campaigns, Evaluation, and Collaboration

### Reporting Progress on State-Level Goals and Objectives

The UConn School and Family SNAP-Ed team has increased its use of electronic, Qualtrics-based data collection on the diet and physical activity behaviors of SNAP and SNAP-eligible individuals and families to demonstrate outcomes consistent with the SNAP-Ed Evaluation Framework. Qualtrics, an online survey and data collection platform, is available to our project through the University of Connecticut. Qualtrics provides a confidential method to collect and maintain information to electronically assess and evaluate our SNAP-Ed projects. Our target audiences access user-friendly, Qualtrics surveys on their Smartphones and UConn Tablets. In particular, we utilize—and will increase our utilization of—electronic collection of diet and physical activity behaviors in our projects toward our State goals of increasing healthy food choices and physical activity. For example, in our school-based SNAP-Ed activities, we evaluate improvements in diet quality (diet healthiness) and physical activity through Qualtrics online behavior checklists from pre to post intervention. We plan to increase our use of electronically collected evaluation data that indicates progress toward our State-level goals and objectives. These data are kept on a secure UConn server for reporting outcomes of our SNAP-Ed work.

### Description of Projects/Interventions

#### *Project/Intervention Title:*

#### **UConn Department of Allied Health Sciences (DAHS) School and Family-Based SNAP-Education Services for the Obesity Prevention Grant Program FFY 2019-21.**

The Allied Health Sciences three-year project is driven by the Needs Assessment coordinated with the CT SNAP-Ed implementing agencies and multiple partnerships to promote healthy weight, healthy eating and enjoyable physical activity among SNAP recipient and eligible adults, families with children, and seniors. We complement evidence-based nutrition education and obesity prevention activities based on the Dietary Guidelines for Americans at the individual/group levels as well as comprehensive/multi-level interventions. Our project yields high and cost-effective output via a team of registered dietitians (RD) and competent, trained volunteer paraprofessionals in synergy with partnering agencies/organizations' needs.

#### *Related State Objective(s):*

In alignment with the State-level objectives, our team will:

-Reach **6,605 participants** with direct nutrition education and obesity prevention efforts via presentations and workshops using culturally and literacy-appropriate materials including *Start Simple with My Plate*, Powerpoint presentations, **interactive m-health, social media**, and hands-on displays and food models. We aim to educate and motivate individuals and families to increase healthy food choices and healthy eating patterns,

manage weight (consume sensible portions and increase physical activity to balance calorie intake and expenditure), decrease intake of sugar sweetened beverages and increase intake of water, cook more at home and consider growing vegetables and/or herbs at home. We extend our reach via a variety of indirect education channels (hard copy, calendars, electronic communications, nutrition education reinforcements).

-Implement feasible methods to evaluate the outcomes of our tailored education with our diverse groups in our community-based settings.

-Support comprehensive, multi-level interventions and avoid duplication of services by coordinating efforts within a community, across SNAP-Ed projects, and continuing to grow our rich partnerships in synergy with federally-funded nutrition programs, Title 1 schools, non-profit community-based projects, and agencies in our target communities.

-Educate/inform our SNAP eligibles of the SNAP program and food access agencies to address food insecurity and increase dietary quality.

***Audience:***

SNAP recipients and eligibles (focused on adult women, children, and families) via well-established partners in our target counties (**Hartford, New Haven, New London, Tolland, Windham**) and communities (**Bristol, East Hartford, Enfield, Hartford, Manchester, New Britain, Norwich, Tolland, Willimantic, Waterbury, Windsor**). These are in the Connecticut Top 20 towns with the most SNAP participants (CT SNAP-Ed Plan Needs Assessment) or specific agencies within communities that serve low-income participants (Enfield, Tolland, West Hartford).

We are diligent to tailor and focus nutrition education to our audiences of SNAP recipients and eligibles utilizing collaborative efforts with long-term partners and stakeholders already serving low-income groups. No waivers are required.

***Food and Activity Environments:***

We work closely with key stakeholders and site personnel (e.g., Title I schools, WIC, Commodity Program, mobile/stationary food pantries) to develop and implement nutrition education that addresses the nutrition/obesity and weight management issues pertinent to the target audience and their healthy food and physical activity environments, in the context of the *Dietary Guidelines for Americans*. Interviews with key stakeholders elicit pertinent information about the audiences' awareness and access to healthy foods and beverages, and places to be physically active. Our nutrition education lessons aim to increase nutrition knowledge, skills, competence and goal-setting to lose weight safely if overweight or obese. We empower our audiences to improve diet quality within the context of budget strategies and local foods available (e.g., pantry foods for adults who cook at home, healthy foods from the national school lunch program for students in a SNAP-Ed eligible school). Each lesson includes a

discussion on label reading, MyPlate, the importance of physical activity and balancing calories consumed with expended, along with water as the daily beverage of choice. When space permits—and tailored to the health of the group—lessons involve simple physical activity “breaks” (stand up, stretch) with discussion on walking as a safe, inexpensive, healthy form of exercise. There is always a reminder to check with a health care provider before starting any new form of exercise you are not used to engaging in.

***Project Description:***

Five sub-projects (1A/B, 2, 3, 4 described below) are grounded in theories of behavior change and aligned with the Socio-Ecological Framework (*multifaceted and interactive effects of personal and environmental factors that influence behaviors*) to achieve the learning objectives by working at the individual, family/group, and community levels.

For example, we utilize the Social Cognitive Theory (*an individual's knowledge acquisition directly relates to observing others within the context of social interactions, experiences, and media influences*), with motivational nutrition education that is tailored to the participant and his or her learning environment. We couple our knowledge-based learning with reinforcing sensory activities like food demonstrations and food sampling and fun, interactive review “games”. Finally, we evaluate our direct nutrition education with paper and pencil and growing technology-based platforms (e.g., topical quizzes, interactive challenges and games via handheld tablets) on site, and follow-up with key informant interviews and participant surveys with individuals in our partnering agencies.

**Project 1A—Multi-level obesity prevention via partnerships with FoodCorps, Cooking Matters, Cooking Matters at the Store (CMATS), and grocery stores in low-income communities.**

**Description:** This project partners with groups in our target communities/counties to reach adult individuals and families with school-aged children with tailored nutrition education coordinated with the school meal programs, local food environments and enhancements, and locally-grown produce in grocery stores. These partnerships create synergy in program delivery and assure reaching the target audiences with effective formats that meet their learning needs.

**The anticipated direct education deliverables for this project are 550.** This project is **multi-level** as it promotes healthy eating environments in the school, home and community (especially grocery stores where SNAP recipients and eligibles shop) as well as supports consumption of locally grown food.

**SNAP-Ed funds** are requested specifically to focus and enhance the nutrition education for SNAP recipients and eligibles, working with the CT FoodCorps team to boost parent engagement with school-based nutrition and gardening activities, and partnering with Cooking Matters in CT to implement Cooking Matters funded programming at community sites and in grocery stores, paying for the time and travel of our UConn RDs,

reinforcement materials/supplies, and foods for tasting (only with FoodCorps classroom activities in schools).

**Implementation:** Our team engages children and families in schools, and adult individuals, seniors and families in grocery stores with approved MyPlate, SNAP-Ed Key Behavioral Objectives, and approved and evaluated Cooking Matters curriculum, reinforcing and enhancing the above with interactive food models and displays (sugar in soda, fat test tubes, grocery store circulars for menu planning, label reading), and information about SNAP.

**FoodCorps** occurs primarily during the school year (September-November, February-April), dictated by the classroom and health education teachers' schedules, as well as afterschool programming. FoodCorps has "in district" school service member who:

- assist with marketing/recruitment of children in classrooms and afterschool programs;
- coordinate with us to implement nutrition education to kids and their parents;
- collaborate with UConn School and Family to develop a parent needs assessment and enhanced parent education program;
- build and tend school gardens to reinforce SNAP-Ed principles and guidance;
- bring high-quality local food into public school cafeterias while reinforcing the importance of farm to school programs; and
- collaborate with our nutrition education team on school wellness committees to improve school meals, the school food environment and wellness policy implementation.

**Anticipate** 470 direct nutrition education contacts per year.

#### Evaluation/Enhancements from Years 1 to 3:

- Year ONE: By the end of year 1, one (1) new FoodCorps collaboration/district will be added to deliver MyPlate nutrition education during the school year with coordinated messages for the family. (Objective 3.1)
- Year ONE: By the end of year 1, Food Corps and UConn SNAP Ed will have developed and implemented a parent survey to assess parent interest in Food Corps messages home and parent involvement. (Objective 3.1)
- Year TWO: At least 2 FoodCorps collaborations/districts will have cafeteria tastings of 3 new vegetables with messages and recipes shared with the family. (Objective 1.1)
- Year TWO and THREE: At least 2 FoodCorps service members in our target districts will report UConn collaborations have influenced system change (Objective 3.3) with 3 examples of healthy menu changes in their cafeterias and greater involvement of parents/caregivers in FoodCorps/SNAP-Ed.
- Year THREE: Our SNAP-Ed nutrition education participants (children and parents) will demonstrate willingness to eat sample foods offered during a class, and report improvements in nutrition knowledge, intent to change, consumption of school fruit and vegetable offerings and eating more vegetables at home (Objective 1).

**Cooking Matters** occurs year-round but is funding-contingent and sites are often participatory in subsidizing a six-week series of classes. SNAP-Ed does not fund Cooking Matters classes. Cooking Matters serves to:

- recruit participants at sites serving SNAP recipients and eligibles in our targeted counties;
- coordinate with our team to implement nutrition education services;
- increase delivery of science-based, culturally-appropriate, and literacy-level-specific nutrition education to participants across all stages of the life cycle (evaluated Cooking Matters curriculum);
- provide hands-on experience with basic food preparation and cooking techniques to empower participants to prepare healthy meals and snacks at home
- provide \$10 gift cards (funded by partner Community Health Network of CT Foundation) to participants as follow up to grocery store “My Plate” pop up tours

**Anticipate 30 direct nutrition education contacts per year.**

Evaluation/Enhancements from Years 1 to 3:

- By the end of each year, we will add one (1) new site in our targeted areas to deliver the six-class Cooking Matters series (Objective 3.1)
- After attending the six-class series, and based on a pre to post survey, ≥33% of participants will report an increase in ability to plan a healthy diet and their willingness to prepare and consume healthy foods. (Objective 1)

**Cooking Matters at the Store/grocery store collaborations** serve to:

- recruit SNAP recipients/eligibles in community sites and schools serving low-income families;
- provide approved and evaluated hands-on grocery curriculum (e.g., nutrition facts label reading) to empower participants to shop for nutritious foods on a limited budget.

**Anticipate 50 direct nutrition education contacts per year.**

Evaluation/Enhancements from Years 1 to 3:

- By the end of each year, we will add at least one (1) Cooking Matters at the Store event. (Objective 3.1)
- After attending the grocery store event and based on post-survey, ≥50% of CMATS participants will report increased knowledge and ability to choose healthier foods in the grocery store and ≥25% will report they plan to increase their consumption of healthy food. (Objective 1)

**Project 1B—Multi-level obesity prevention via community partnerships:**

**Description:** This project highlights our on-going collaborations with well-established



community networks and associations (eg farmers markets, public schools, health care service site in low-income community) to reach SNAP Ed recipient and eligible adults and families with direct and indirect nutrition education, enhance access to healthy foods, increase consumer confidence to purchase and prepare healthy foods, and follow safe food handling. The nutrition education delivered follows the SNAP-Ed toolkit evidence-based and peer-reviewed scientific literature. This project is **multi-level** as it delivers nutrition education to individuals and groups while promoting healthy eating environments at home, in schools, and in the community, as well as supports consumption of locally grown food. These collaborations occur at various “seasonal” or “academic” times during the year.

**The anticipated direct education deliverables for this project are: 2,555.**

**SNAP-Ed funds** are specifically requested to enhance the nutrition education for SNAP recipients and eligibles, paying for the time and travel of our UCONN RDs and/or masters-prepared nutrition educators, reinforcement materials and supplies, and food ingredients for food demonstrations and tastings, which occur at all sites except Foodshare mobiles.

**Implementation:** Our team supplies adult individuals, families with school-aged children, and seniors with MyPlate nutrition education materials, SNAP-Ed Connection recipes, SNAP information, and engages these participants in interactive lessons reinforced with food models, displays and/or food demos and a tasting, often with participant involvement, interaction and assistance. Lessons usually last an hour.

**Charter Oak Health Center (Hartford community health center)** serves to:

- Provide direct access to SNAP recipients and eligibles in a community urban setting;
- Provide quality teaching space (e.g., certified kitchen) for lessons and food tastings;
- **Establish a small farmers market over the summer to increase access for urban locals to fresh fruits and vegetables.**

Nutrition educator RDs and paraprofessionals partner with Charter Oak RDs to tailor USDA My Plate, Dietary Guidelines for Americans, and Cooking Matters materials to client’s perceived and stated needs for knowledge and applications for obesity prevention. As supported in our evidence base, coupling nutrition education with recipes and tastings increases willingness to prepare and eat healthy foods (43).

**Anticipate 100 direct nutrition education contacts per year.**

Evaluation/Enhancement from Years 1 to 3:

– Years ONE to THREE: Each year, at least 33% of the community clinic patients will

report willingness to increase fruit and vegetable consumption, motivation to cook more at home, and overall healthier eating. (Objective 1)

– Years ONE to THREE: Each year, at least 50% of the participants in the weight management program will report efforts at balance calorie intake with calorie expenditure and a healthier weight (Key Behavioral Outcome)

– Years TWO and THREE: Each year, we will recruit one (1) Cooking Matters series or assist with a cooking class on site (Objective 3.1)

**2. GROW Windham**—Collaboration with GROW Windham and their partners (CLICK Community Kitchen; Access; Generations Health Care; Windham Community Food Network; EFNEP) expands opportunities to provide education to SNAP Ed recipients and eligibles and fuel changes to the local environment to make healthy choices practical and available to individuals and families in the community (e.g., gardens, farmers markets).

GROW Windham serves to:

- Work with the UConn School and Family SNAP-Ed team to deliver nutrition education lessons in school-based afterschool Youth Health and Wellness Program. This Program is dedicated to promoting healthy food via community gardens, food projects, and food and garden-based youth programming, leadership and engagement in Windham that support the local food system.
- Collaborate with community partners dedicated to promoting access to healthy food in the Windham region through the support of community food projects and on-going community exchanges, surveys, and dialogue with community members.

**Implementation:** When funding is available to schedule afterschool classes through Grow Windham and its Youth Coordinator, UConn SNAP Ed nutrition educator RDs and paraprofessionals tailor lessons to elementary and middle school students. Lessons utilize USDA My Plate for Kids and Cooking Matters materials to engage students in fun, interactive lessons, and when possible cooking with kids. Topics include decreasing sugar sweetened beverages, balance calories in and out, including more fruits and vegetables in your snacks and meals, and choose low-fat dairy at least 3x per day.

Evaluation/Enhancements from Years 1 to 3:

– Years ONE to THREE: UConn School and Family will collaborate with GROW Windham to tailor and help deliver nutrition education lessons with kids via the Windham Middle School enrichment program, share findings with stakeholders, and work to incorporate new vegetable offerings into the school lunch menu (Objectives 3.1; 3.3)

– Years ONE to THREE: By the end of each collaborative year, at least 30% of youth in Willimantic afterschool programming will report and demonstrate willingness to eat sample foods offered, improvements in nutrition knowledge, and intent to change

dietary behaviors (Objective 1)

– Years ONE TO THREE: We will collaborate with EFNEP to implement food- and garden-based education in afterschool programs at the Willimantic CLiCK Cooperative and Garden (Objective 1)

– Years ONE to THREE: We will collaborate with the Windham Community Food Network to survey community members (creates an exchange of ideas with community members) on food insecurity, local food assistance, fresh fruit and vegetable access, food cost, and community program ideas. (Objective 3.1; 3.3; 3.4)

– Years ONE to THREE: We will collaborate with Grow Windham to collect community data that will inform a program called BASICS, which eventually aims to provide deep discounts on staple food products at the local food “co-op”. We will assist with a market basket survey to compare the BASICS prices with other local stores and will offer assistance with the dissemination of the information and nutrition education, based on the SNAP-Ed Toolkit, when collaborative efforts reach pertinent timing in the project (Objective 3.1; 3.2; 3.3; 3.4)

**Anticipate** 350 direct nutrition education contacts per year.

**3. WIC (New Britain/Bristol, Norwich, East Hartford, and Willimantic)** serves to:

Provides direct access to SNAP families (especially moms) in the sites’ waiting rooms; Coordinate with our team to provide mini-lessons (e.g., MyPlate displays, food demos and tastings, WIC-approved information on breastfeeding encouragement).

**Anticipate** 200 direct nutrition education contacts per year through six WIC agencies in our targeted communities where we have an 8+ year history of collaboration. We will coordinate with other SNAP-Ed implementing agencies to avoid duplication.

Evaluation/Enhancements from Years 1 to 3:

– Years ONE to THREE: Coordination with WIC educators to identify reinforcing and multi-level nutrition education messages to participants via a face-to-face format in the waiting rooms at WICS (e.g., improved dietary quality and breastfeeding) (Objective 3.2)

– YEARS ONE TO THREE: Consistent delivery of nutrition topics with a focus on purchasing, storing and preparing veggies tailored to WIC mother’s and family’s preferences, and cooking interests and abilities (Objective 1)

**4. Brass City Harvest (Waterbury Farmers Market)** serves to:

Provide direct access to the low-income population in urban Waterbury, and Coordinate with our nutrition education team to deliver SNAP-Ed via MyPlate materials, cooking tips/recipes, and offer vegetable tastings based on those donated by the farmers at the market.

**Anticipate 500 direct nutrition education contacts each year.**

Evaluation/Enhancements from Years 1 to 3:

– With coordination of recipes/tastings for vegetables distributed by farmers, and using simple on-site survey, at least 50% of the participants each year will report increased knowledge of selection and preparation of healthy foods, especially vegetables, and willingness to cook more at home (Objective1)

**5. Public Schools Norwich, Manchester, East Hartford, Afterschool Manchester and Windsor**

Manchester (Bowers, Martin, Roberston, Verplank, Waddell, Washington Elementary); Norwich Teachers' Magnet School; and Windsor (Clover St. Elem, Sage Park Middle School, Poquonock Elementary) serve to:

- Provide direct access to afterschool/health classes of elementary/middle- school age children.
- Coordinate with the UConn School and Family nutrition education team to deliver tailored messages and interactive lessons following FARM to School lessons and reinforcing MyPlate for Kids materials in classrooms with technology-based interventions, reinforcement tastings and healthy behavior messages. Collaborative meetings with teachers result in nutrition topics most needed by students: eating more f/v, drinking fewer SSBs, exercising to balance calories in and out, etc. Tailored lessons via PP slides are approved by SNAP Ed RDNs. Aligned with Project 4 and the evidence for Project 4, we are utilizing the technology available in the schools and classroom to tailor nutrition education messages to reported behaviors, screen for food insecurity, which are then aligned with the school meal programs, coordinated with community food security resources and action, as well as reinforcing nutrition education materials and healthy nutrition and physical activity behavior campaigns.
- Support low-income (and potentially food-insecure) parents and families with free lunch during the summer months when school is not in session (Windsor Public Schools: Goslee Pool site; Poquonock Elementary School; Manchester Public Schools: Squire Village (Squire Village is a family low-income housing apartment subsidized by the federal government's HUD (Housing and Urban Development Division)).

**Anticipate 1135 direct contacts per year.**

Evaluation/Enhancements from Years 1 to 3:

– Years ONE to THREE: Elementary and middle schoolers' report improvements in knowledge, skills, and/or willingness to change dietary quality and physical activity will increase from 25% (year 1) to 30% (year 2) to 35% (year 3) (Objective 1; Objective 2)

-Years ONE to THREE: Continued support to our partner public schools' summer meals programs to offer tailored nutrition education to school-age children and their families who remain on site during lunch. Evaluation will consist of post-program surveys and key informant interviews to determine that we are delivering desired topics and meeting the education needs of the population (Objective 1; Objective 3).

**6. West Hartford Fellowship (public housing site for seniors, West Hartford)** serves to:

- Provide direct access to low-income seniors in a community setting;
- Provide a quality teaching space;
- Coordinate recruitment, marketing and tailored nutrition topics; and
- Offer a new Foodshare mobile stop that provides residents with fresh vegetables. Recipes matching seasonal vegetables are provided by UConn registered dietitians

**Anticipate 20** direct contacts per year.

Evaluation/Enhancements for Years 1 to 3:

Years ONE to THREE: At least one-third (33%) of the seniors will report improvements in overall healthier eating, basic culinary skills, and food resource management (Goal 1)  
Year THREE: We will coordinate with West Hartford Fellowship to offer one (1) “virtual pop up” grocery store tour led by RDNs and trained dietetics paraprofessionals to further develop residents’ grocery shopping skills (Objective 1). Residents receive a \$10 Shoprite gift card at no cost to SNAP Ed. This collaboration with Cooking Matters of CT funds the cards.

**7. Manchester Senior Center** serves to:

- Provide direct access to low-income seniors in a community setting;
- Provide a quality teaching space; and
- Coordinate recruitment, marketing and tailored nutrition topics

**Anticipate 250** direct contacts per year.

Evaluation/Enhancements for Years 1 to 3:

Years ONE to THREE: At least one-third (33%) of the seniors will report improvements in overall healthier eating, basic culinary skills, and food resource management (Goal 1)  
Year THREE: We will coordinate with Manchester Senior Center to offer one (1) virtual pop up grocery store tour led by RDNs and trained dietetics paraprofessionals to further develop residents’ grocery shopping skills (Objective 1)

**Project 2—Nutrition education partnerships at food pantries that offer “client**

**choice format” and mobile pantries to decrease food insecurity, improve dietary quality, decrease obesity risk of adults and to increase cooking at home:**

**Description:** *Freshplace* ([www.chrysaliscenterct.org/programs-services/community-connections/freshplace](http://www.chrysaliscenterct.org/programs-services/community-connections/freshplace)) has had early impact successes to decrease level of food insecurity and increased dietary quality, both to promote healthy weight and prevent obesity. *MANNA* ([www.handsonhartford.org/MANNA](http://www.handsonhartford.org/MANNA)) provides basic needs to Hartford’s most vulnerable (homeless, children and families in crisis, low-income seniors citizens). *Enfield Food Shelf* (EFS) ([enfieldfoodshelf.org](http://enfieldfoodshelf.org)) has been a non-profit volunteer organization “*assuring that no Enfield resident goes hungry because of a lack of resources.*” **USDA Summer Meals** (<https://www.fns.usda.gov/summerfoodrocks>) offer nutritious free meals for children and teens from low-income families at many locations throughout the nation and CT during the summer while the school lunch program is not available. **Foodshare** ([www.foodshare.org](http://www.foodshare.org)) mobile pantries (Hartford and Tolland counties) are pantries-on-wheels that bring fresh produce and other food to SNAP recipients and eligibles in need at community sites throughout Hartford and Tolland counties. The program increases access to healthy food and nutrition throughout the region serving an average of 16,000 visitors each month. In 2017 Mobile Foodshare distributed over 4 million pounds of food to 70 different locations. Positioning knowledgeable nutrition educators at pantry and mobile sites where SNAP recipients and eligibles gather is an effective means to share nutrition topics, recipes, and information ([healthyfoodbankhub.feedingamerica.org](http://healthyfoodbankhub.feedingamerica.org)). We maintain a supportive role with the distribution of nutrition education materials for Enfield Food Shelf as they administer the Commodity Supplemental Foods supplied by USDA.

**The anticipated direct education deliverables for this project are 1,475.**

(Freshplace 200 direct; MANNA 200 direct; Enfield Food Shelf 450 direct; Enfield Summer Meals 25; Foodshare Mobile 600 direct).

**SNAP-Ed funds** are requested for our nutrition education team to conduct the nutrition education activities (time and travel), for reinforcement materials and supplies, and food ingredients for tastings at pantry sites and summer meals lessons.

**Implementation:** Our nutrition education team provides “point of service” nutrition education to engage participants in food discussions and simple food tastings, with a recipe (SNAP-Ed Recipe Connection) and SNAP information. These collaborations depend on internal pantry scheduling (i.e., when clients shop) and occur year-round. We have collaborated over two years to assist Dr. Katie Martin (Vice President & Chief Strategy Officer at Foodshare) to implement the SWAP system in selected local pantries. SWAP is a Stoplight Nutrition Ranking System designed to help promote healthy food choices at food banks and food pantries. It creates an easy- to- implement, easy- to- understand nutrition ranking system to categorize the food offered in a food pantry. Additionally, Tina Dugdale is a member of the Foodshare Health and Nutrition Advisory Council (FHNAC) with its goal to carefully assess, develop and implement new

policies for food accepted from outside vendors for distribution by Foodshare. The Foodshare Executive Board recently voted unanimously to approve Foodshare's first ever Nutrition Policy! For the Enfield Summer Meals Program at the nearby St. Patrick's Church Hall, the UConn School and Family nutrition educators supply nutrition education once per week for an hour to SNAP eligibles and recipients from late June to mid August. Educators utilize *USDA My Plate* and *Dietary Guidelines for Americans* to tailor simple and developmentally appropriate lessons to a wide age-range of children and often their parents on site.

Each site pantry serves to:

- Provide direct access to SNAP recipients and eligibles and USDA Commodity Food recipients
- Coordinate with our team to tailor nutrition messages to healthy pantry foods, increased fruit and vegetable consumption, increased cooking at home, and food safety practices

Foodshare mobiles serve to:

- Establish multiple sites for food distribution to SNAP eligibles and recipients, and
- Coordinate with our nutrition education team to provide handouts and recipes targeted to increasing vegetable knowledge, preparation and consumption.
- 

**Enfield Summer Meals (Lunch Bunch) serves to:**

- Support low-income (and potentially food-insecure) parents and families with free lunch during the summer months when school is not in session. In Enfield, our long-term partner Enfield Food Shelf is a collaborator in the delivery of this program.

Evaluation/Enhancements from Years 1 to 3:

-Years ONE thru THREE: With on-going coordination of recipes and tastings of the foods/vegetables at pantry sites, at least 50% of the participants each year will verbally report increased knowledge of selection and preparation of healthy foods, especially vegetables, and willingness to purchase, consume, and cook more at home (Objective 1.6)

-Years ONE thru THREE: Continued support to the SWAP Program in selected pantries and assistance to implement in new pantries over time (Objective 1; Objective 3)

-Years ONE thru THREE: Support to the development and implementation of an evaluation for the SWAP Project in site pantries (Objective 3)

--Years ONE to THREE: Continued support to the summer meals program to offer tailored nutrition education to school-age children and their families who remain on site during lunch. Evaluation will consist of post-program surveys and key informant interviews to determine that we are delivering desired topics and meeting the education needs of the population (Objective 1; Objective 3).

-Years ONE to THREE: With increasing coordination of recipes for foods distributed, and using simple on-site survey in our targeted communities, at least 50% of the Foodshare Mobile participants each year will verbally report increased knowledge of selection and preparation of healthy foods and cooking more at home (Objectives 1.6; 3.2)

### **Project 3— Addressing High Rates of Overweight/Obesity in Young Toddlers and Preschoolers**

**Description:** We have partnered with Dr. Jennifer Harris at the UConn *Rudd Center* for Food Policy & Obesity, Dr. Molly Waring at the UConn Center for mHealth and Social Media, and with agencies in East Hartford (Connecticut Children’s Medical Center pediatric practice in East Hartford, Early Child Learning Center, WIC), New Britain (The Human Resources Agency of New Britain Head Start and School Readiness Program) Manchester (Manchester Early Learning Center) and Willimantic (WIC) to address the high levels of overweight and obesity that can develop in young toddlers and exists in preschoolers. This **multi-level** project is non-duplicative with other CT SNAP-Ed projects. Surveys of 61 parents/caregivers of young toddlers revealed the need for nutrition education. Approximately one-third of toddlers are being served sugary beverages daily in portion sizes larger than 8 oz as well as in food portions larger than usual or toddlers. Parents/caregivers need to increase the diversity of fruits/vegetables they serve their children and let the toddler determine the amount of food consumed instead of encouraging them to “finish their plates.”

**The anticipated direct education deliverables for this project are 1,400.**

**SNAP-Ed funds** are specifically requested for our UConn RDs and/or masters-prepared nutrition educators to conduct the nutrition education activities (time and travel) described below, for reinforcement materials and supplies, and food ingredients for tastings.

**Implementation:** We place RDs and trained para-professionals in direct contact with young families, parents/caregiver and children where we support *The Healthy Eating Research Feeding Guidelines for Infants and Young Toddlers: A Responsive Parenting Approach* and encourage fruit and vegetable consumption, avoidance of sugary beverage consumption, appropriate portion sizes, and healthy eating for both young toddler/pre-school age (and picky eater) and adults/families. We conduct tailored direct nutrition education in the clinical waiting rooms (pediatric centers, WIC), childcare centers, or family resource centers as well as fruit and vegetable “sensory lessons” in the classroom, and brief contacts with parents/caregivers during pick-up/drop-off and school events. We also will implement a coordinated and evidence-based communications plan and materials to deliver persuasive, reinforcing information about the targeted behavior(s) via highly influential but infrequent contact points (e.g., well-



child visits at pediatric clinics, WIC offices), via social media and mhealth concurrent with frequent tips and supportive messages via ongoing communications (e.g., Family Resource Centers, social media, text messages). The communications plan will be developed by quantitative and qualitative methods with research funding from the Connecticut Health Development Institute and Child Health Foundation. The preschool school-based programs are aligned with I am Moving/I am Learning reinforced by tastings as reported in our evidence base for Project 3 (24-30). Our collaborations also include participation on health committees (advisory boards) to improve the school food environment; we also assist to interpret weight screenings of the preschoolers. For indirect nutrition education, we leave unmanned tables in high traffic parent areas with culturally-appropriate and family-oriented nutrition information, SNAP information, and seasonal cooking tips/recipes for diverse audiences.

### **1. Encouraging Healthy Food Consumption in Young Toddlers – East Hartford via CCMC-affiliated pediatric practice, WIC, and Early Childhood Learning Center at Hockanum School, in addition to Willimantic WIC.**

#### Evaluation/Enhancements from Years 1 to 3:

- Years ONE thru THREE: ≥50% of the classrooms will have received a nutrition-related/sensory lesson with fresh vegetables tailored for preschoolers (Objective 1).
- Year ONE thru THREE: Coordinate nutrition education and communications plan on healthy feeding of toddlers between pediatric care, WIC program, Family Resource Centers and Childcare, Social Media (Objective 3.1)
- Year ONE thru THREE: ≥50% of parents will be able to recall and comprehend the nutrition education and communications as well as report the direct and digital communications are useful. All community partners will report that the education and communications plan is useful and feasible/practical to their organization
- Years TWO thru THREE: ≥25% of the teachers will engage in a nutrition education lesson (train-the-trainer) on healthy eating, physical activity and healthy environments (Objectives 1, 2 & 3)
- Years TWO thru THREE: Tailor the messages program to the parent/caregiver responses to a simple survey conducted on a handheld tablet in clinical waiting rooms (Pediatrics clinics, WIC) with follow-up online messages and reinforcing handouts based on the parent/caregivers' preferences (mhealth)
- Years TWO thru THREE: Parents/caregivers will report significant and clinically relevant pre/post program changes in self-efficacy, normative beliefs, intent to engage in targeted feeding practices (Objective 1)
- Year THREE: ≥50% of the teachers will report, by our validated survey (Pediatric-Adapted Liking Survey), improved fruit/vegetable consumption among ≥50% of preschoolers who were poor or average consumers (Objective 3)

### **2. New Britain Head Start (NBHS); Manchester Early Learning Center, Manchester; Early Childhood Learning Center at Hockanum School, East Hartford CT; Hartford**

**Pre-Kindergarten Magnet School, Hartford CT and Windham Regional Community Council's Early Childhood Program in Willimantic.**

Evaluation/Enhancements from Years 1 to 3:

- Years ONE thru THREE: ≥50% of the classrooms will receive a nutrition-related/sensory lesson on healthy foods tailored for preschoolers (Objective 1)
- Year TWO thru THREE: ≥25% of the teachers will engage in a nutrition education lesson (train-the-trainer) on healthy eating, physical activity, and healthy environments (Objectives 1, 2 & 3)
- Year THREE: ≥50% of the teachers will report, by our validated survey, improved fruit/vegetable consumption among ≥ 50% of preschoolers who were poor or average consumers (Objective 3)

**Project 4—Nutrition Education partnership to improve diet quality and decrease obesity risk of children: CT Children's Medical Center (CCMC) Emergency and Department, Primary Care and Dental Clinics**

**Description:** CCMC is an urban children's health care facility (65% Medicaid recipients). In the Pediatric Emergency Department or Primary Care or Dental Clinic, we partner with the physicians (Dr. Sharon Smith), dentists (Karen Kemp-Prosterman, D.D.S.), healthcare staff, and premed undergraduates to screen parents and children for diet/physical activity behaviors that increase risk of obesity with a simple liking survey—the Pediatric-Adapted Liking Survey (PALS)—as well as assess body mass index percentile and waist circumference percentile. To be able to provide parent and child immediate and tailored messages based on the PALS responses, we put the PALS and health (dental health, body image, sleep) and food insecurity questions online with the UConn-supported Qualtrics platform.

From a PED cohort of over 900 children [1], we developed algorithms from the online PALS responses to trigger messages of positive reinforcement and encouragement of healthy eating and physical activity. These messages were developed with interactions with 300+ middle schoolers (separate school districts) about sugary beverages, water, fruit, physical activity and screen time. With the online PALS, we can provide immediate tailored messages. These messages work within the constructs of the social cognitive theory, supporting intentions to—and subsequent changes in— behavior. The next step is to communicate the screening findings and message focus with the primary care physician and to use the Qualtrics platform to send follow-up healthy eating and physical activity messages coordinated with website information and recipes. Funding from USDA Hatch will test the impact and refine the message system.

The anticipated direct education deliverables for this project are: **625.**

**SNAP-Ed funds** are requested for the parking, supplies, and materials for our nutrition education team to deliver direct nutrition education activities and evaluation. Funding is also requested to train and monitor the volunteer paraprofessionals in the delivery and evaluation of these nutrition education activities.

**Implementation:** All parent and child dyads receive “My Weight Ruler” handout with the child’s BMI% category in a culturally-relevant manner [2] and supportive positive messages (avoiding negative messages of dieting, restriction or weight loss, which can result in poor outcomes). Qualtrics algorithms of the online PALS responses generate tailored messages and reinforcing pictures. For example, they receive a positive vegetable message with liking vegetables and a behavior change message with high preference for sugary beverages (see below).

Aligned with motivational interviewing, the nutrition educator will ask the children and parents to select the most useful message with the behavior they think that they can work on and provide a reinforcing handout with ideas to support the behavior change.

Parents will  
questions about the  
(stage of change,  
efficacy for helping  
behavior, perceived



Keep crunching on  
veggies! The more  
you eat the better  
they're packed with  
vitamins and fiber!



Stop your thirst with  
water! Sugary drinks will  
just make you thirstier!

complete 3 online  
message topic  
perceived self-  
their child meet this  
importance for the

child to improve this behavior). Based on voluntary approval, parents will receive one weekly message either by email or text for 4 weeks after the clinical visit. The message will be tailored to their most desired behavior change and their stage of behavior change. The last week will include a brief follow-up survey to assess action towards the recommended behavior change and satisfaction with the messages. **Parents reporting food insecurity through the online survey will receive a text message with website about SNAP and food security resources.**

### Evaluation/Enhancement from Years 1 to 3:

- Years ONE thru THREE: 85% of parent/child dyads will report that the messages in the PED or sent home are useful; 50% will report the intent to make changes to improve on their diet quality and physical activity for supporting a healthy weight; and 30% will report that they improved their healthy behaviors. We will continue to refine the messages based on reports from the parents, children and stakeholders
- Years TWO and THREE: Coordinate the screening information and message programs with the primary care physicians or dentists.

### **Evidence Base:**

Successful reductions in rates of childhood obesity occur in communities that implement **multi-level interventions** to improve diet and physical activity as well as engage stakeholders [3]. We have rich and robust community partnerships over 16+ years that have built rapport and trust so that these collaborators look to us, and include our team in plans to improve the healthiness of low-income children and families. Our project delivers nutrition education and our nutrition education team serves as partners and leaders throughout our targeted community areas to increase access to healthy foods and plan environments that support healthy weights. This work aligns with the mission and activities of being employees and students of the University of Connecticut, College of Agriculture, Health and Natural Resources. We utilize evidence-based nutrition education approaches and materials, including My Plate, the Dietary Guidelines for Americans, USDA FNS Core Nutrition Messages and USDA Food Safety Resources.

### Project 1: *Multi-level obesity prevention via community partnerships*

The approaches outlined in Project 1 are research-based. For FoodCorps, program evaluation by the Tisch Center for Food, Education and Policy [4] shows that >75% of schools with the presence of FoodCorps after one year had measurably healthier school food environments. In addition, students who participated in FoodCorps hands-on activities (cooking and gardening, activities to incorporate fruits and vegetables into their diets) tripled their consumption of fruits and vegetables. And, school systems with more resources in the FoodCorps activities showed greater outcomes. From a published cluster randomized controlled trial, school gardening interventions need to be combined with school-based education to improve dietary quality of children [5]. These findings support our efforts to partner with FoodCorps to increase their reach and develop greater child and family engagement with the program to achieve healthy diet and obesity prevention goals. There is theoretical support for the association between cooking more at home and prevention of chronic diseases [6]. Cooking Matters was evaluated using a quasi-experimental design with nonequivalent comparison group and 6-month follow-up [7]. In the evaluation, low-income participants had improved confidence in food resource management skills and worried less about food running out by the end of the month.

These findings support that Cooking Matters helps low-income families eat healthier, even during times of economic hardship. Cooking Matters at the Store also has shown positive impact from program evaluation [8]. Five weeks after a single tour, participants reported saving money on groceries because of using food management strategies, a greater level of food security, and purchasing healthier foods. The impact was greatest among SNAP participants. Our own evaluation of Cooking Matters at the Store showed high satisfaction of the nutrition education by clients and grocery store administrators.

According to the USDA, there has been a sharp increase in SNAP redemptions at

Farmers markets, including a 69.7% increase in Connecticut from 2012 to 2017 (<https://fns-prod.azureedge.net/sites/default/files/snap/SNAP-Farmers-Markets-Redemptions.pdf>). Mobile food pantries increase the access to fresh produce among low-income families who have limited means of transportation [9]. Our practice of coupling recipes with tastings of vegetables available at Farmer's markets and pantries can increase the preparation and consumption of these vegetables [10].

Technology offers adolescents familiar communication channels to encourage accurate reporting and provide tailored messages. From our study last academic year, we found that an online survey was useful and feasible for assessing student health behaviors and providing tailored messages at school [11]. Seventh graders (n=202) from all science classes (53% male) completed the pediatric-adapted liking survey (PALS) [1], questions about sleep, school meals, media use, food security, and survey usability/usefulness/satisfaction. PALS-response algorithms triggered healthy reinforcement/encouragement messages. Adolescents reported their feelings about the messages and readiness to change the target behavior. Most students completed the survey (89%) and reported it was easy and made them think about their behaviors (83%). The PALS food, beverage and activity groups showed good variability (most liked—sedentary, sweets; least liked—vegetables, fiber). Significant diet quality differences were detected with interactions between gender and self-reported food security (40% affirmed worrying about running out of food, eating less, or being hungry with insufficient food at home). Students received an average of three messages tailored to PALS responses—most frequent were reinforcing (increasing water or whole grain consumption) or encouraging (drink water or eat fruit instead of sugary foods/beverages). Most (79%) reported learning something new, the messages were helpful, and were open to receiving future messages.

Project 2: **Nutrition education partnerships at food pantries that offer “client choice format” and mobile pantries to decrease food insecurity, improve dietary quality, decrease obesity risk of adults and to increase cooking at home**

The approaches outlined in Project 2 are research-based. Our collaborations with pantries include food tastings of healthy products that are untypical or uninteresting to some cultures and pantries cannot move out (eg, wheat bread for white; whole grain pasta for white; some vegetables; and ingredients in simple recipes to increase cooking at home). Offering this nutrition education at food pantries increases diet quality of the individuals and families [12]. SNAP-Ed can decrease the risk of food insecurity according to an observational study [13]. According to statistics presented in a recent peer-reviewed scientific paper, Connecticut colleagues including Dr. Katie Martin (vice president and chief strategy officer, Foodshare) and Dr. Marlene Schwartz (Director, UConn Rudd Center) [14], up to half of families who use food pantries have the double burden of food insecurity and a chronic disease. These researchers have spearheaded a feasible method to rank foods in food banks/pantries by nutritional criteria (Supporting

Wellness at Pantries or SWAP). The goal of SWAP is to increase the supply and demand for healthier foods in food banks/pantries [14]. From initial evaluation of SWAP piloted in 6 Connecticut pantries, 2/3 of the pantry staff/volunteers liked the system and said that it was easy to use [14].

### **Project 3: Addressing High Rates of Overweight/Obesity in Young Toddlers and Preschoolers**

The approaches outlined in Project 3 are research-based. Numerous peer-reviewed scientific research as well as our own evaluation studies have shown that with young toddler and preschool interventions involving parents and teachers, parents help to establish and develop healthy eating behaviors early for promotion of healthy weight and reduction of the risk of obesity. Data from the 2011-2012 NHANES shows risk of obesity of infants and young toddlers at 8.1%, which in turn, increases the risk of childhood obesity [15]. Infants and young toddlers from low-income families have disparities in diet quality and nutrient intakes compared with those from higher income families [16]. The Robert Wood Johnson Foundation's Healthy Eating Research Program in collaboration with the USDA/CDC Pregnancy and Birth to 24 Months Project provide evidence-based guidelines for feeding and for translating into nutrition education practices in the home, school and agencies reaching young toddlers [17]. There is great developmental plasticity between 1 and 2 years old, when toddlers transition from breastmilk or formula and pureed foods to the family diet. Food preferences established at this age lay the foundation for a lifetime of healthy or unhealthy eating. Toddlers must have continuous exposure to a variety of healthy solid foods of differing textures and tastes (including fruits/vegetables) to develop a preference and regularly consume healthy beverages (including water and plain milk), while limiting consumption of sugar-sweetened beverages, juices, sweets, and other nutrient poor foods. Early adoption of fruit/vegetable liking associates with more favorable weights later in childhood [18].

Low-income mothers report conflicting messages from pediatricians, nutrition programs, family members and friends [19]. While pediatricians' advice is highly trusted, well-child visits are as brief as 15 minutes to assess and address health needs, leaving limited time for nutrition guidance. Fueling the confusion, the Internet inundates new parents with advice (often company-sponsored) that promotes nutritionally poor toddler products [20]. Although nutrition educators find mothers are receptive to messages to improve their child's diet [21], messages must be tailored to the child-mother dyad, involve their peers, and be consistent with messages from clinicians. As low-income parents seek online information via smartphones, messages on recommended feeding practices must be short, cogent, and easily accessible by current and emerging social media [22].

Low-income families deviate from recommended feeding practices according to our recent online survey of 142 low-income families in East Hartford, CT [23]. For example,

54% reported serving sweetened drinks to toddlers and 17% served sweetened milks. One-half served them in sippy cups for easy consumption and 63% in 8+ oz cups. The majority also served their toddler unhealthy snacks, including sweets (55%), salty snacks (52%) and crackers (78%). Nonresponsive feeding was also common. Only 13% reported that their child mostly/only decides how much to eat, and 55% reported that they make their child finish all food served sometimes/always. Eighty-one percent of these families used Facebook regularly and, from focus groups during Spring 2019, low-income families with toddlers would be very interested in receiving information via a private Facebook site.

Preschoolers also fall short of dietary recommendations with low intakes of fruits and vegetables and, according to the NHANES 2013 to 2016, 11.6% are obese [24]. Over half of preschoolers (58%) attend center-based childcare according to the 2016 U.S. Department of Education, National Center for Education Statistics ([nces.ed.gov/fastfacts/display.asp?id=4](http://nces.ed.gov/fastfacts/display.asp?id=4)). Our sensory lessons with the preschoolers are grounded in scientific evidence. Sensory lessons with fruits and vegetables encourage preschoolers to taste [25,26], especially if this lesson is not during mealtime [27]. Nutrition education in childcare centers improve intakes of vegetables in the center as well as in the home from a randomized group study [28]. Our interventions have been refined and sustained over the years, which supports positive impact of SNAP-Ed interventions delivered in child care centers on preschoolers' diet quality [29]. Our SNAP-Ed has shown significant ability to improve diet quality and carotenoid status among preschoolers [30]. The diet quality measure was a simple liking survey [31] that was responsive to changes in the intervention and the carotenoid status measure [30].

#### **Project 4: CT Children's Medical Center (CCMC) Emergency Department, Primary Care and Dental Clinics**

The approaches outlined in Project 4 are research-based. Elevated rates of childhood obesity call for multi-tiered approaches, including prevention efforts in clinical settings [32]. Chronic illnesses have been targeted in the pediatric emergency department (PED), including screening, brief interventions and referrals [33-36]. Adolescents and low-income children who use PEDs have been shown to have unhealthy dietary behaviors and often do not obtain primary medical or preventive care [33,37]. Brief interventions for obesity treatment and prevention have successfully been accomplished in the PED [34].

We propose continuing our brief intervention in the PED for children being treated for non-urgent issues, combining communicating the BMI percentile with the evidence-based My Weight Ruler [2] and quick screening of dietary and physical activity behaviors with the Pediatric Liking Survey (PALS). The PALS has proven feasible in a clinical setting (high response rate, excellent clinical-home test-retest reliability [38]. In usual care visits at CCMC pediatric emergency department (PED) Vosburgh, 2016 #1461}, 925 children and parents completed the PALS. A Healthy Behavior Index constructed from the PALS responses was able to detect differences in healthiness in parent > child,

gender (females>males), age (older> younger), health insurance (private>public), and community description of the family residence (higher income/food security>lower income/ food security). In testing the online PALS in the PED, over 300+ parent/child dyads both reported high satisfaction with the online survey (>90% agree with ease of use, understanding, and the survey was fun) and that doing it made them think about what they eat and do. From initial testing of tailored messages from the PALS responses in 269 child/parent dyads—80-92% of the children and parents agreed that they learned something new from the messages, the messages were helpful and they would like to receive messages in the future [39]. The messages are affective (supporting enjoyment, social) instead of highlighting physical/health risks to be more effective in supporting behavior change [40]. Tailoring the messages to the parent's stage of change, perceived self-efficacy for helping their child meet this behavior, and perceived importance for the child to improve this behavior will increase the effectiveness [41]. Individuals with low self-efficacy may benefit more from tailored messages to assist in making behavior changes [42].

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### **Key Performance Indicators (KPIs):**

Across all projects, we maintain a comprehensive web-based system to document direct and indirect contacts as well as comply with EARS reporting. This system is securely accessible anywhere via the Internet, has checks/balances/back-up systems for accurate program reporting and forecasting future program delivery. We are complying with the mandated changes.

All projects also have participant and stakeholder satisfaction with and relevance to our nutrition education.

**Project 1A—Multi-level obesity prevention via partnerships with FoodCorps, Cooking Matters, Cooking Matters at the Store (CMATS), and grocery stores in low-income communities.**

### **FoodCorps**

- New FoodCorps collaborations/districts
- Parent involvement with FoodCorps/SNAP-Ed collaborations
- Coordination of food tastings with menu offerings
- Changes in wellness indicators in the School with the FoodCorps/SNAP-Ed collaborations including healthy menu items
- Change in nutrition knowledge, intent to change, and change in fruit and vegetable consumption of the school meal offerings (measured by plate waste or reported food waste)
- Numbers reached with direct nutrition education
- Numbers of parents interested in FoodCorps involvement at their child's school via online survey

### **Cooking Matters**

- New target area to deliver six-class Cooking Matters series and the grocery store events
- Ability to plan a healthy meal and increased willingness to prepare and consume a healthy diet

### **Project 1B—Multi-level obesity prevention via community partnerships:**

#### **Charter Oak Health Center**

- Changes in diet quality from pre-post surveys [43] and self-reported confidence in cooking more at home [44].
- Changes in body weight.
- Continued collaboration on cooking classes and accompanying nutrition education

#### **GROW Windham**

- New sites for nutrition education and increasing access to healthy foods
- Changes in knowledge for healthy eating and intent to improve dietary behaviors via the validated online survey [1,38] and tailored messages [39]

#### **WIC**

- Coordination with WIC to offer nutrition education that is tailored to families.

#### **Brass City Harvest Farmers' Market**

- Coordination of recipes and nutrition education with vegetables available.
- Changes in knowledge, selection, preparation and diet behaviors.

#### **Public Schools and Senior housing**

- Changes in knowledge for healthy eating and intent to improve dietary behaviors.

### **Project 2—Nutrition education partnerships at food pantries that offer “client**

**choice format”, and mobile pantries to decrease food insecurity, improve dietary quality, decrease obesity risk of adults and to increase cooking at home**

- Changes in knowledge, selection, preparation and consumption of a healthier diet
- Trained RDs and dietetics students monitor the SWAP program in select pantries to help grade the healthiness of the pantry foods being shelved, and to reposition those placed errantly.

**Project 3— Addressing High Rates of Overweight/Obesity in Young Toddlers and Preschoolers**

- Changes in the quality of teacher-reported classroom nutrition education.
- Participation in social media and satisfaction with social media involvement.
- Coordination of nutrition education and communications plan between clinical, outreach, educational settings as well as the client’s home
- Changes in parent-reported self-efficacy, normative beliefs, and intent to engage in targeted feeding practices of young toddler [23].
- Changes in preschoolers’ fruit and vegetable consumption in the preschool and home [30].

**Project 4: CT Children’s Medical Center (CCMC) Emergency Department and Primary Care and Dental Clinics**

- Changes in intent and improvements in diet quality and physical activity as reported by the validated online survey [1,38] and tailored messages [39].
- Coordination of the screening information and message program with primary care physicians or dentists

***Use of Existing Educational Materials:***

Source	Specific Author	Description	Language	Cost
Dietary Guidelines 2015-2020; USDA “Start Simple w My Plate” Adults USDA Choose MyPlate for Kids; SNAP-Ed “My Plate for My Family”	Unknown	Approved USDA materials	Eng and Span	No cost
Iowa State Extension	Unknown	12-month calendars with recipes to encourage cooking at home	Eng and Span	\$.80 each for order of 500

USDA: SNAP-Ed Connection: Recipe Finder/Mixing Bowl; Team Nutrition; Fight Back Food Safety; USDA FNS Core Nutrition Messages	Unknown	Approved USDA materials	Engl and Span	No cost
Produce for Better Health Foundation ( <a href="http://www.pbhfoundation.org">www.pbhfoundation.org</a> )	Unknown	Topic reinforce handouts	Eng and Span	No cost; downloadable
Cooperative Extension System: ( <a href="http://www.extension.org/families_food_fitness">www.extension.org/families food fitness</a> )	Unknown	Topic reinforce handouts	Eng and Span	No cost; downloadable
FoodCorps USA/FoodCorps of CT Foodcorps.org	Unknown	Topic reinforce handouts	Eng and Span	No cost
Professional organizations (Academy of Nutrition and Dietetics)	Various RD/PHD authors	Topic reinforce handouts	Eng and Span	Handouts at low cost or downloadable
New England Dairy & Food Council ( <a href="http://www.newenglanddairycouncil.org">www.newenglanddairycouncil.org</a> )		Topic reinforce handouts	Eng and Span	Handouts and/or items less than \$5.00
Learning Zone Xpress ( <a href="http://www.learningzonexpress.com">www.learningzonexpress.com</a> )		Topic reinforce handouts	Eng and Span	Handouts and/or items less than \$5.00
Positive Promotions ( <a href="http://www.positivepromotions.com">www.positivepromotions.com</a> )		Topic reinforce handouts	Eng and Span	Handouts and/or items less than \$5.00
Nutrition Matters ( <a href="http://www.numatters.com">www.numatters.com</a> )			Eng and Span	Handouts and/or items less than \$5.00
Nasco Nutrition ( <a href="http://www.enasco.com/nutrition">www.enasco.com/nutrition</a> )			Eng and Span	Handouts and/or items less than \$5.00

***Development of New Educational Materials:***

No new material development with SNAP-Ed funds are planned for FFY-2019-21, although we will modify approved materials to tailor to the SNAP-eligible and their family.

## Evaluation Plans

Our project does not involve large-scale evaluation and only historical controls (e.g., previous Child Nutrition Program participation). Our team has secured funding from the Connecticut Child Health Development Institute as well as USDA Hatch to evaluate Projects 3 and 4.

**Name:** All Projects 1a, b; 2; 3 and 4 will be a part of our evaluation efforts

**Type:** Short-term outcome or impact assessment and process evaluation

**Questions:** See questions below

**Approaches and Planned Use:** We plan to share the findings with local stakeholders and use the results to improve our SNAP-Ed program effectiveness.

### **Short and medium-term questions and outcomes within the SNAP Ed Evaluation Framework where appropriate:**

1. Did our program recruit new sites to deliver nutrition education or new partnering organizations? (ST7: Partnerships)
2. Did any partnering school systems improve the healthy meal offerings at breakfast or lunch? (MT5: Nutrition Supports)
3. Did the participants state a willingness to change behaviors for obesity prevention? (post-test only) (ST1: Healthy Eating)

As part of our **short-term outcome evaluation**, we will assess willingness to change or reported change, including the following examples:

- Student, client or parent reported change in nutrition knowledge, change in preference as a proxy for consumption [30,31,38], self-efficacy, food safety practices as well as intent or motivation to change dietary and physical activity behaviors
- Working with the school lunch program directors to document participation in School Lunch/Breakfast Programs and increased selection of fruits/vegetables at school lunch [45]. Working with teachers and via observation to document changes in preschoolers' consumption of vegetables at lunch
- Parent-reported motivation/anticipated behavior changes to increase purchasing and preparation of healthy foods
- Observed improvements in cooking/shopping skills of participants engaged in "hands-on" skill-building, and direct nutrition education lessons through validated instruments

**Process evaluation** to assess the effectiveness and continuous quality improvement (CQI) of our nutrition education to reach target audiences in an effective manner, we will utilize:

- Interviews with community partners and key informants (ST8: Multi-sector Partnerships and Planning)
- Coordination of nutrition education messages with food distribution, across programs, and with other professionals reaching the target audience (ST8: Multi-sector Partnerships and Planning)
- Coordination of nutrition education messages and foods available or distributed (ST1: Healthy Eating; ST7: Partnerships)
- Orientation and direct observation of volunteer paraprofessionals by registered dietitians/nutrition educators
- Group discussion, reflection, and feedback on nutrition education delivery between volunteer paraprofessionals, nutrition educators and community partners
- Network and sharing best practices with nutrition educators via the Academy of Nutrition and Dietetics, CT Academy of Nutrition and Dietetics, Cooperative Extension, EFNEP, Food Corp, SNAP-Ed Connection and End Hunger, CT (ST8: Multi-sector Partnerships and Planning)
- Post-activity surveys conducted for select direct nutrition education activities to assure high level of satisfaction and quality of the activity (ST: Readiness and Capacity)
- Engagement of our nutrition education team within organizations that work toward obesity prevention for SNAP-Ed recipients and eligibles (ST: Readiness and Capacity)
- Monitoring and upkeep of EARS data collection and reporting system

**Prior Evaluation:** If the project has been evaluated previously, note the most recent year in which the evaluation was done

UConn School and Family Project has consistently conducted process and short/medium term outcome evaluations toward stated SNAP Ed CT state goals, following SNAP-Ed evaluation guidelines ([www.fns.usda.gov/sites/default/files/SNAPEDWavell\\_Guide.pdf](http://www.fns.usda.gov/sites/default/files/SNAPEDWavell_Guide.pdf)). We have documented any evaluation in the evidence/research-based section of this proposal.

**Use of SNAP-Ed Evaluation Framework:** Identify the Evaluation Framework indicators that are used.

Based on the SNAP Ed framework, our projects address the following components:

	Readiness and Capacity	Changes	Effectiveness
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	(Short Term)	(Medium Term)	and Maintenance (Long Term)
Individual	<p>Goals and Intentions:</p> <p>ST1: Healthy Eating ST2: Food Resource Management ST3: PA and Reduced Sedentary Behavior ST4: Food Safety</p> <p>*Addressed in educational workshops</p>	<p>Behavioral Changes: (same as left)</p> <p>Post survey documents willingness and motivation to change food and exercise habits</p>	N/A
Environmental Settings	<p>Organizational Motivators:</p> <p>ST5: Need and Readiness</p> <p>ST6: Champions</p> <p>ST7: Partnerships</p>	<p>Organizational Adoption and Promotion:</p> <p>Outreach to sites where SNAP recipients work, learn and shop (schools, grocery stores, community gardens, etc)</p> <p>Cafeteria tastings and menu changes in the NSLP in part due to UCONN/Food Corps collaboration</p> <p>Grow Windham partnerships to increase access to fruits and veggies and local foods</p>	N/A
Sectors of Influence	<p>Multi Sector Capacity:</p> <p>ST8: Multi-sector Partnerships and Planning</p> <p>MT11: Linkages between pediatrics and community activities for obesity prevention</p> <p>MT5: Nutrition Supports for Obesity Prevention</p>	<p>Grow Windham (and partners: Willimantic Schools, WIC, CLICK community kitchen and co-op)</p> <p>Toddler Grant (healthy consistent messaging to Moms)</p> <p>Cooking Matters; CCMC collaboration; COHC; all pantry partnerships; Food Corps</p>	

	MT8: Agriculture LT12: Food Systems	Farmers Market/CSA; pantries; mobiles	
--	--	--	--

**Coordination of Efforts**

Team members from UConn School and Family consistently meet in person (or utilize electronic communications), with representatives from other Implementing Agencies (UConn Husky and University of Saint Joseph, USJ) to coordinate SNAP Education with large agencies that request assistance. Foodshare and CT Food Bank, for example, cover the entire 8 counties, but UConn School and Family delivers nutrition education at Foodshare mobiles only in Hartford and Tolland counties. UConn Husky Nutrition also utilizes Foodshare mobiles for nutrition education. USJ covers the other counties with CT Food Bank. For Foodshare sites that USJ or UConn Husky Nutrition would like to visit, there is close communication among the programs to avoid overlap and duplication of services. Additionally, collaborative agreements with UConn Husky Nutrition and the Department of Public Health have resulted in carefully controlled SNAP-Ed presence at preschools and WIC sites in the general Hartford area.

## Template 3: SNAP-Ed Staffing Plan

### Staffing 2020

**Project Name: UConn School and Family SNAP-Ed FFY 2020**

Position Title Attach statement of work listing SNAP-Ed related job duties for each position	FTEs charged to SNAP-Ed Attach definition of FTE and basis for calculations	Percentage of SNAP-Ed Time Spent on Management/Administrative Duties	Percentage of SNAP-Ed Time Spent on SNAP-Ed delivery. Include all approaches described in Guidance Section 1	SNAP-Ed Salary, Benefits, and Wages Federal dollars only
Project Leader—Valerie Duffy, PhD, RD \$141,722 9-month base salary, 28.7% fringe on summer only.	.0396 FTE (40 hrs/wk) (base + 3 mo. summer @ \$47,241)	30%	70% (approaches 1 & 2)	\$9,631
Program Specialist—Tina Dugdale MS RN RD CD-N \$ 69,625 11-mth salary, 56% fringe	80% of 11-mo appointment (40 hrs/wk) or 0.733 FTE	5%	95% (approaches 1 & 2)	\$86,892
Nutrition Educator – hourly (Donna Zigmont RD CD-N) Spec. Payroll \$38.85/hr, 28.7%fringe	17 hrs/wk, 52 wks/yr; 0.49 FTE based on 35 hrs/wk full time	20%	80% (approaches 1 & 2)	\$44,199
Nutrition Educator – graduate student (Rachel Hildrey) \$30.559/hr academic yr (19.8% fringe); \$31.012/hr summer (28.7% fringe)	780 hrs academic yr; 340 hrs in summer; 0.54 FTE	5%	95% (approaches 1 & 2)	\$42,126
Nutrition Educator – graduate student (Sarah Chau) \$30.559/hr academic yr (19.8% fringe); \$31.012/hr summer (28.7% fringe)	390 hrs academic yr; 340 hrs in summer; 0.35 FTE	5%	95% (approaches 1 & 2)	\$27,848

Nutrition Educator – graduate student (Haley Gershman) \$30.559/hr academic yr (19.8% fringe)	390 hrs academic yr; 0.19 FTE	5%	95% (approaches 1 & 2)	\$14,278
To be name RD graduate student laborer 28.8/hr in the summer (4.3% fringe)	290 hours 0.14 FTE	5%	95% (approaches 1 & 2)	\$8,711
To be name dietetics graduate student laborer 20/hr in the summer (4.3% fringe)	480 hours 0.23 FTE	5%	95% (approaches 1 & 2)	\$10,013
			Total Staffing Budget: Enter total for all salary, benefits, and wages from Federal dollars here.	<b>243,698</b>

## SNAP Ed related job duties 2020

### UConn School and Family SNAP-Ed Statement of Work/Job Duties

#### FFY20

Project Leader (Valerie Duffy, PhD, RD)—For 30%, management/administrative, responsible all year long for overseeing staff; fiscal monitoring; assures compliance of SNAP-Ed funding and procedures in accordance with UConn, State and Federal requirements. In 70% of time, guiding program planning, evaluation and reporting, program monitoring, and staff coordination.

Program Specialist (Tina Dugdale, MS, RDN, RN, CD-N)—For 95%, delivery of nutrition education programs, supervise nutrition paraprofessionals, cooking demonstrations, meeting with site contacts to set up programming. For 5% of time in management/administration, schedule activities, coordinate volunteer dietetics paraprofessionals (junior and senior undergraduate, dietetic interns, graduate students); review program reports on EARS, time and effort, accounting for travel, attending meetings with community partners, market programs, provide technical assistance and foster coordination and collaboration.

Nutrition Educator Special Payroll (Donna Zigmont, RD)— In 20% management/administration, responsible for purchasing of nutrition education materials, monitoring of budget, oversight of EARS administration, assisting in the preparation of project annual report. For 80% in direct nutrition education, delivery of nutrition education programs, mentor nutrition paraprofessionals, and engage in cooking demonstrations.

Nutrition Educator Graduate Student (Rachel Hildrey, RD)—For 95%, deliver nutrition education programs, mentor nutrition paraprofessionals, meet with site contacts to set up programming. For 5%, management/administrative duties, schedule activities, assist in monitoring volunteer dietetics paraprofessionals (undergraduates and dietetic interns); submit program reports on EARS; program evaluation, time and effort, accounting for travel, attending meetings.

Nutrition Educator Graduate Student (Sarah Chau, RD)—For 95%, deliver nutrition education programs, mentor nutrition paraprofessionals, meet with site contacts to set up programming. For 5%, management/administrative duties, schedule activities, assist in monitoring volunteer dietetics paraprofessionals (undergraduates and dietetic interns); submit program reports on EARS; program evaluation, time and effort, accounting for travel, attending meetings.

Nutrition Educator Graduate Student (Haley Gershman, RD)—For 95%, deliver nutrition education programs, mentor nutrition paraprofessionals, meet with site contacts to set up programming. For 5%, management/administrative duties, schedule activities, assist

in monitoring volunteer dietetics paraprofessionals (undergraduates and dietetic interns); submit program reports on EARS; program evaluation, time and effort, accounting for travel, attending meetings.

Graduate Student Laborer summer (TBA)– For 95%, deliver nutrition education programs, mentor nutrition paraprofessionals, meet with site contacts to set up programming. For 5%, management/administrative duties, schedule activities, assist in monitoring volunteer dietetics paraprofessionals (undergraduates and dietetic interns); submit program reports on EARS; program evaluation, time and effort, accounting for travel, attending meetings.

Graduate Student Laborer summer (TBA)– For 95%, deliver nutrition education programs, mentor nutrition paraprofessionals, meet with site contacts to set up programming. For 5%, management/administrative duties, schedule activities, assist in monitoring volunteer dietetics paraprofessionals (undergraduates and dietetic interns); submit program reports on EARS; program evaluation, time and effort, accounting for travel, attending meetings.

## Salary & Fringe 2020

### DIRECT PROGRAM STAFF – Fiscal Year 2020 (Carry-over included)

#### (a) Program Salaries

<u>Position/Name</u>	<u>Annual Salary</u>	<u>No. of Persons</u>	<u>% funded in this contract (FTE)</u>	<u>Salary</u>
Project Leader/Duffy	\$ 141,722 at 9-month base + 3 months summer	1	3.96%	\$ 7,483
Program Specialist/Dugdale	\$69,625 11 month	1	80%	\$55,700
Nutrition Educator/Zigmont (hourly)	\$38.85/hour	1	49% 17 hr/wk, 52 wk/yr	\$34,343
Nutrition Educator – Graduate Student/Rachel Hildrey	\$47,439	1	100% Academic (20 hrs/week); 65% summer	\$34,380
Nutrition Educator – Graduate Student/Sarah Chau	\$47,439	1	50% Academic (10 hrs/week); 65% summer	\$22,462
Nutrition Educator – Graduate Student/Haley Gershman	\$47,439	1	50% Academic (10 hrs/week)	\$11,918
TBA RD Grad student laborer	\$28.80/hour	1	22% (290 hours)	\$8,352
TBA Grad diet student laborer	\$20/hour		37% (480 hours)	\$9,600
<b>Total program Salary amount from section (a)</b>				<b>\$184,238</b>

#### b) Program Fringe Benefits

<u>Position/Name</u>	<u>Fringe %</u>	<u>Total Fringe</u>
Project Leader/Duffy	28.7% (summer salary)	\$2,148
Program Specialist/Dugdale	56%	\$31,192
Nutrition Educator/Zigmont (hourly)	28.7%	\$9,856
Nutrition Educator – Graduate Student/ Rachel Hildrey	19.8% AY; 28.7% Summer;	\$4,720+3,026 =\$7,746
Nutrition Educator – Graduate Student/ Sarah Chau	19.8% AY; 28.7% Summer;	\$2,360+3,026 =\$5,386
Nutrition Educator – Graduate Student/ Haley Gershman	19.8% AY;	\$2,360
TBA RD Grad student laborer	4.3%	\$359
TBA Grad diet student laborer	4.3%	\$413
<b>Total Fringe amount combined from section (b)</b>		<b>\$ 59,460</b>

**Total Program Salary (total amount from section (a) & (b) combined**

**\$ 243,698**

## Template 4: SNAP-Ed Budget Information by Project

### Information & Budget by Project 2020

#### Section A. Budget Summary for Sub-Grantee

Refer to Appendix E. for additional information on allowable costs.

#### ***Contracts/Grants/Agreements for nutrition education services:***

Provide the information below for each contract, grant, or agreement.

#### ***Name of sub-grantee:***

The University of Connecticut, Department of Allied Health Sciences: Supplemental Nutrition Assistance Program – Education: UConn School & Family-based SNAP-Ed Services Project

#### ***Total Federal funding, grant:***

\$25,000 carry-in + \$305,886.92 in new funding for \$330,886.92 in total

#### ***Description of services and/or products:***

This project includes multi-level interventions with complementary organizational and institutional level approaches for nutrition education and obesity prevention in SNAP eligible and recipient school-aged children and their families (mostly women) primarily in Tolland, Windham, New London, New Haven and Hartford counties, including the towns of Bristol, East Hartford, Enfield, Hartford, Manchester, Meriden, Middletown, New Britain, Norwich, Tolland, Willimantic, Waterbury, West Hartford, Windsor, and targeted towns in these counties covered by Food Share Mobiles. We leverage a large group of nutrition education volunteer paraprofessionals to assist in the delivery of direct and indirect nutrition education.

#### ***Cost of specific services and/or products:***

The total cost of the project is \$330,886.92 as outlined in Template 4B and 4C from October 1, 2019 to September 30, 2020.



**Section B. Project Costs**

**Federal Fiscal Year: 2020**

**State: Connecticut**

**Sub-grantee Name: UConn School and Family SNAP-Ed**

Expenses	Unobligated Balances (Carry-over) from Previous FY	Current FY Budget	Non-Federal Support
Salary/Benefits	18,724	224,974.00	
Contracts/Sub-Grants/Agreements	0	0	
Non-Capital Equipment/ Office Supplies	0	2,461.00	
Nutrition Education Materials	1,117	11,160.40	
Travel	0	4,172.00	
Building/Space Lease or Rental	0	0	
Cost of Publicly-Owned Building Space	0	0	
Maintenance and Repair	0	0	
Institutional Memberships and Subscriptions	0	0	
Equipment and Other Capital Expenditures	0	0	
<b>Total Direct Costs</b>	19,841	242,767.40	0
Indirect Costs (Indirect Cost Rate= 26%)	5,159	63,119.52	
<b>Total Federal Funds</b>	25,000	305,886.92	Leave blank
<b>Total Federal Funds Including Unobligated Balance from Previous FY</b>	Leave Blank		Leave Blank
Estimated Unobligated Balance from Current FY to Next FY, if any	Leave blank		

Signature of Responsible Official: \_\_\_\_\_

Date: \_\_\_\_\_

**Budget narrative: \$25,000 carry-in + \$305,886.92 = \$330,886.92**

**Salary/Benefits: \$18,724 + \$224,974 = \$243,698**

- RD Project Leader—.0396 FTE based on 40 hours/week (1 person/fringe rate 28.7%).
- RD Program Specialist—.73 FTE based on 40 hours/week (1 person/fringe rate 56%).
- RD Nutrition Educator (special payroll, hourly)—.49 FTE based on 35 hours/week (1 person/fringe rate 28.7%).
- RD Nutrition Educator (graduate student)—.54 FTE based on 40 hours/week [20 hours/week during 9-month academic year (19.8% fringe) and 340 hours in the 3 summer months (28.7% fringe)].
- RD Nutrition Educator (graduate student)—.54 FTE based on 40 hours/week [20 hours/week during 9-month academic year (19.8% fringe) and 340 hours in the 3 summer months (28.7% fringe)].
- RD Graduate student laborer—.14 FTE based on 40 hours/week (4.3% fringe).
- Graduate student nutrition education assistant—.23 FTE based on 40 hours/week (4.3% fringe).

**Contracts/Sub-Grants/Agreements: \$0**

**Non-capital equipment/office supplies: \$2,461**

Supplies for conducting nutrition education, copy charges, postage and office management. This includes: software/minor equipment \$1,200, Printing \$533, Postage \$20, Program Supplies \$400, and Training \$308.

**Nutrition Education Materials: \$12,277.40**

Purchase and reproduction of nutrition education materials including ink toner and paper, curricula, handouts for direct nutrition education programming, food for sampling/tastings and nutrition education reinforcements costing less than \$5.00 each. Most nutrition education materials (handouts, recipes, tip sheets, etc.) will be reproducible in small orders within the Department of Allied Health Sciences ( $\leq 200$  copies; B&W @ .023/copy or color @ .07/copy) or at UConn Document Production ( $>200$  copies; B&W @ .08 and color @ .40 per double-sided copy) to keep project costs down. We will utilize appropriate free materials when possible.

Nutrition Education materials to provide clients/families

Direct contacts—Budgeted at \$.40/contact or \$2,083

Indirect contacts—Budgeted at \$.09/contact or \$2,349

Nutrition Education for demonstrations and presentations

\$1,535.40 (Plates with MyPlate graphic, MyPlate banners for tastings and other nutrition education activities, MyPlate tear-off pads (English and Spanish), MyPlate bingo game);

limited Number of New NASCO food models

Program reinforcements (e.g., cutting board, vegetable brush, magnetic grocery pad, sticker) - \$5,000 (aim to reach between 2000 and 2500 participants with at \$3.00 to \$2.50 per participant cost, respectively)

Food for demonstrations and tastings: \$1,310 (Food - \$1000; Food service utensils and supplies, as needed, for tastings and cooking demonstrations - \$310)

**Travel: In-State Travel: \$4,172 (see justification on Template 4C); \$0 Out-of-State Travel**

***Building/space lease or rental: \$0***

***Cost of publicly-owned building space: \$0***

***Maintenance and repair: \$0***

***Institutional memberships and subscriptions: \$0***

***Equipment and other capital expenditures: \$0***

***Total direct costs: \$19,841 + \$242,767.40 = \$262,608.40***

***Total indirect costs: \$5,159 + \$63,119.52 = \$68,278.52 (26%)***

***Total Federal funds: \$25,000 + \$305,886.92 = \$330,886.92***

***Estimated unobligated balances (carry-over) from current FY to next FY, if any:***  
\$25,000

***Total Federal funds including unobligated balance from previous FY: \$330,886.92***

## Section C. Travel

***In-State Travel: \$4,172***

### ***Travel Purpose:***

Travel is primarily for nutrition education staff to deliver nutrition education programs where SNAP recipients live and work, making them accessible and convenient. Program leaders meet periodically with collaborators and community agencies to consolidate efforts and target the audience most effectively.

### ***Travel destination (city, town or county or indicate local travel):***

Travel in addition to direct delivery of nutrition education will be to meet with community partners, market programs, provide technical assistance and foster coordination and collaboration. (1) Project Leader and (4) part-time staff (other than volunteers) and up to 45 volunteer dietetics paraprofessionals (junior and senior undergraduates and dietetic interns) will conduct in-state travel for this project. Travel is charged only if the amount of mileage exceeds that from traveling to and from work or if travel is from the workplace. Only the paid nutrition education team will be reimbursed for travel expenses. Volunteers may be paid for parking charges. All in-state travel is conducted with private vehicles; car-pooling is encouraged.

### ***Number of staff traveling:***

Only the paid nutrition education team (6 nutrition educators) will be reimbursed for travel. Programming can run 6 days week (Monday-Saturday) over 12 months.

### ***Cost of travel for this purpose: \$34 in parking fees plus mileage \$4,138***

<b><i>Area Traveled</i></b>	<b><i>Round Trip</i></b>	<b><i># of Weeks</i></b>	<b><i># Per week</i></b>	<b><i>Staff</i></b>	<b><i>Total</i></b>
Windham County	14	14	1	1	196
New London County	65	11	1	1	715
New Britain/Bristol	69	14	1	1	966
Hartford County	52	37	2	1	3848
Tolland County	20	10	1	1	200
Waterbury	110	11	1	1	1210
				<b>Total Mileage</b>	7,135
				<b>Cost @.58 /mi</b>	\$4,138

***Total In-State Travel Cost: \$4,172***

***Out-of-State Travel: \$0***

**Section B. Project Costs**

**Federal Fiscal Year: 2020**

**State: Connecticut**

**Sub-grantee Name: UConn School and Family SNAP-Ed**

Expenses	Unobligated Balances (Carry-over) from Previous FY	Current FY Budget	Non-Federal Support
Salary/Benefits	18,724	224,974.00	
Contracts/Sub-Grants/Agreements	0	0	
Non-Capital Equipment/ Office Supplies	0	2,461.00	
Nutrition Education Materials	1,117	11,160.40	
Travel	0	4,172.00	
Building/Space Lease or Rental	0	0.00	
Cost of Publicly-Owned Building Space	0	0.00	
Maintenance and Repair	0	0.00	
Institutional Memberships and Subscriptions	0	0.00	
Equipment and Other Capital Expenditures	0	0.00	
<b>Total Direct Costs</b>	<b>19,841</b>	<b>242,767.40</b>	<b>0</b>
Indirect Costs (Indirect Cost Rate= _____)	5,159	63,119.52	
<b>Total Federal Funds</b>	<b>25,000</b>	<b>305,886.92</b>	<b>Leave blank</b>
<b>Total Federal Funds Including Unobligated Balance from Previous FY</b>	<b>Leave Blank</b>		<b>Leave Blank</b>
Estimated Unobligated Balance from Current FY to Next FY, if any	Leave blank		

Signature of Responsible Official: Joni Abdel  
 Date: 6/24/19

## DSS Travel In and Out Travel Cost

## Template 4: SNAP-Ed Budget Information by Project

### Section C. Travel

Provide the following information for all travel included in your SNAP-Ed budget:

#### **DSS Staff**

##### ***In-State Travel***

***Travel Purpose:*** Justification of need for travel, including how attendance will benefit SNAP-Ed

CT, Department of Social Services (DSS) has 6 contractors who conduct SNAP Ed activities throughout CT. Two activities to be monitored per contractor. The activities that are monitored by the SNAP Ed team are changed yearly, unless an activity is determined to be at risk, it is monitored again the following year.

##### ***Travel destination (city, town or county or indicate local travel):***

We have not selected which activities we will be monitoring for FFY20. All the activities that we monitor are in CT. Below is an estimate of anticipated activity that will be monitored multiplied by 12.

##### ***Number of staff traveling:***

3 DSS Staff-SNAP Public Assistance Consultants

##### ***Cost of travel for this purpose:***

12x33 miles round trip x \$.58/miles=\$229.70 rounded up

**\$230.00**

##### ***Total In-State Travel Cost:***

**\$230.00**

##### ***Out-of-State Travel***

***Travel Purpose:*** Justification of need for travel, including how attendance will benefit SNAP-Ed

We anticipate attending the 2020 Annual Conference Society for Nutrition Education and Behavior (SNEB) on July 19-21, 2020 in San Diego, CA. It is an international community of professionals actively involved in nutrition education and health promotion. The conference provides forums for sharing innovative strategies for nutrition education, and disseminating research findings. Specifically, this is also an opportunity to meet nationwide SNAP-Ed coordinators as well as an opportunity for sharing of information and experiences in program implementation. This meeting will



also provide an opportunity to gain valuable insight into best practices for evidence-based interventions in the arena of nutrition education and physical activity promotion for obesity prevention.

***Travel destination (city and State):***

San Diego, CA

***Number of staff traveling:***

2

***Cost of travel for this purpose:***

**\$4,567.00**-This amount is anticipated to be used for 2 staff to attend this conference. This is to cover the following expenses:

**Registration fee**=\$590.00x2= \$1180.00

**4 nights lodging**=\$215.00x4x2=\$1720.00

**Transportation Airfare**=\$500.00x2=\$1000.00

**Mileage**=35 milesx2x.58=\$42.00

**Bags**=\$50.00x2=\$100.00

**Meals**= \$182.61x2=\$365.22

**Transportation to site, to and from airport and travel cost (mileage) to airport**  
**80.00x2=\$160.00**

***Total Out-State Travel Cost :***

**\$4,567.22**

***Total In and out of-State Travel Cost:***

**\$4,797.22**

## Appendices

Appendix A-Indirect Cost Rate Letters and Fringe Information

Department of Public Health

Hispanic Health Council

University of Connecticut-Food Security and Husky Sport

University of Connecticut Health Husky Nutrition Programs

UConn University of CT-School & Family & Budget and Costing Guide

Appendix A-Indirect Cost Rate Letters and Fringe Information

**STATE AND LOCAL GOVERNMENTS RATE AGREEMENT**

EIN: 1066000798A9

DATE:06/14/2016

**ORGANIZATION:**

State of Connecticut  
 Department of Public Health  
 410 Capitol Avenue, P.O.Box 340308  
 Hartford, CT 06134-

FILING REF.: The preceding  
 agreement was dated  
 07/17/2012

The rates approved in this agreement are for use on grants, contracts and other agreements with the Federal Government, subject to the conditions in Section III.

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**SECTION I: INDIRECT COST RATES**

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RATE TYPES:      FIXED                  FINAL                  PROV. (PROVISIONAL)      PRED. (PREDETERMINED)

EFFECTIVE PERIOD

<u>TYPE</u>	<u>FROM</u>	<u>TO</u>	<u>RATE (%)</u>	<u>LOCATION</u>	<u>APPLICABLE TO</u>
PRED.	07/01/2016	06/30/2020	40.00	All	(1)
FIXED	07/01/2016	06/30/2020	40.00	All	(2)
PROV.	07/01/2020	06/30/2022	40.00	All	(1)
PROV.	07/01/2020	06/30/2022	40.00	All	(2)

\*BASE

Direct salaries and wages including vacation, holiday, sick pay and other paid absences but excluding all other fringe benefits.

- 
- (1) Applicable to all programs except Federal contracts
  - (2) Applicable to Federal contracts

ORGANIZATION: State of Connecticut Department of Public Health

AGREEMENT DATE: 6/14/2016

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**SECTION II: SPECIAL REMARKS**

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TREATMENT OF FRINGE BENEFITS:

Fringe benefits applicable to direct salaries and wages are treated as direct costs.

TREATMENT OF PAID ABSENCES

Vacation, holiday, sick leave pay and other paid absences are included in salaries and wages and are claimed on grants, contracts and other agreements as part of the normal cost for salaries and wages. Separate claims are not made for the cost of these paid absences.

Accrued vacation and sick leave pay at retirement are not part of the normal cost for salaries and wages. These costs are included in the organization's indirect cost rate.

Equipment means an article of nonexpendable, tangible personal property having a useful life of more than one year, and an acquisition cost of \$5,000 or more per unit effective July 1, 2015.

Your next proposal based on actual costs for the fiscal year ending 6/30/19 is due in our office by 12/31/19.

- (1) Applicable to all programs except Federal contracts.
- (2) Applicable to Federal contracts.

ORGANIZATION: State of Connecticut Department of Public Health  
AGREEMENT DATE: 6/14/2016

**SECTION III: GENERAL**

**A. LIMITATIONS:**

The rates in this Agreement are subject to any statutory or administrative limitations and apply to a given grant, contract or other agreement only to the extent that funds are available. Acceptance of the rates is subject to the following conditions: (1) Only costs incurred by the organization were included in its indirect cost pool as finally accepted; such costs are legal obligations of the organization and are allowable under the governing cost principles; (2) The same costs that have been treated as indirect costs are not claimed as direct costs; (3) Similar types of costs have been accorded consistent accounting treatment; and (4) The information provided by the organization which was used to establish the rates is not later found to be materially incomplete or inaccurate by the Federal Government. In such situations the rate(s) would be subject to renegotiation at the discretion of the Federal Government.

**B. ACCOUNTING CHANGES:**

This Agreement is based on the accounting system purported by the organization to be in effect during the Agreement period. Changes to the method of accounting for costs which affect the amount of reimbursement resulting from the use of this Agreement require prior approval of the authorized representative of the cognisant agency. Such changes include, but are not limited to, changes in the charging of a particular type of cost from indirect to direct. Failure to obtain approval may result in cost disallowances.

**C. FIXED RATES:**

If a fixed rate is in this Agreement, it is based on an estimate of the costs for the period covered by the rate. When the actual costs for this period are determined, an adjustment will be made to a rate of a future year(s) to compensate for the difference between the costs used to establish the fixed rate and actual costs.

**D. USE BY OTHER FEDERAL AGENCIES:**

The rates in this Agreement were approved in accordance with the authority in Title 2 of the Code of Federal Regulations, Part 200 (2 CFR 200), and should be applied to grants, contracts and other agreements covered by 2 CFR 200, subject to any limitations in A above. The organization may provide copies of the Agreement to other Federal Agencies to give them early notification of the Agreement.

**E. OTHER:**

If any Federal contract, grant or other agreement is reimbursing indirect costs by a means other than the approved rate(s) in this Agreement, the organization should (1) credit such costs to the affected programs, and (2) apply the approved rate(s) to the appropriate base to identify the proper amount of indirect costs allocable to these programs.

BY THE INSTITUTION:

State of Connecticut Department of Public Health

(INSTITUTION)

(SIGNATURE)

(NAME)

(TITLE)

(DATE)

ON BEHALF OF THE FEDERAL GOVERNMENT:

DEPARTMENT OF HEALTH AND HUMAN SERVICES

(AGENCY)

Darryl W. Mayes -A

Digitally signed by Darryl W. Mayes -A  
DN: cn=Darryl W. Mayes -A, o=U.S. Government, ou=HHS, email=Darryl.W.Mayes@dhs.gov, c=US

(SIGNATURE)

Darryl W. Mayes

(NAME)

Deputy Director, COST Allocation Services

(TITLE)

6/14/2016

(DATE) 0615

HHS REPRESENTATIVE: Council Moore


Telephone: (212) 264-2069

STATE OF CONNECTICUT  
DEPARTMENT OF PUBLIC HEALTH



Raul Pino, M.D., M.P.H.  
Commissioner

Dannel P. Malloy  
Governor  
Nancy Wyman  
Lt. Governor

From: Abdi H. Elmi, Chief Fiscal Officer   
Subject: Fringe & Indirect Rate for State Fiscal Year 2019  
Date: August 3, 2018

FISCAL MEMORANDUM

No. 19-01

Below please find the estimated fringe rates for grants for the State Fiscal Year 2019. The rates below are to be used when actual rates are unknown as is applicable with newly proposed positions. Actual fringe rates should be used for existing (known) positions. These estimates should be used for planning purposes only.

1. Department of Public Health  
Fringe Benefit Rate Estimate  
For Fiscal Year 2019 (July 1, 2018 – June 30, 2019)

50410 Life Insurance	.10%
50420 Medical Insurance	22.26%
50430 Unemployment Compensation	.23%
50441 FICA	6.20%
50442 Medicare	1.45%
50471 Regular Employee Retirement	64.30%
<b>Estimated Fringe Benefit Rate</b>	<b>94.54%</b>

2. The Indirect Rate has changed to: 40%



Phone: (860) 509-7222 • Fax: (860) 509-7727  
Telecommunications Relay Service 7-1-1  
410 Capitol Avenue, P.O. Box 340308  
Hartford, Connecticut 06134-0308  
[www.ct.gov/dph](http://www.ct.gov/dph)

Affirmative Action/Equal Opportunity Employer



According to CT Office of State Comptroller (OSC) Memorandum No. 2018-11, the Fringe Benefit Rates are as follows:

**CT Office of the State Comptroller (OSC)  
Memorandum No. 2018 - 11**

**Percentage Rate Fringe Benefits**

<u>Account - Code</u>	<u>FY 2018 - 19 Rate</u>	<u>Fringe Benefit Description</u>
50430	0.23%	Unemployment Compensation
50471	64.30%	Employer SERS Retirement Regular Employee
50441	6.20%	Employer Share FICA - Social Security
50442	1.45%	Employer Share FICA - Medicare



NONPROFIT RATE AGREEMENT

EIN: 061018979

DATE:07/31/2017

ORGANIZATION:

FILING REF.: The preceding agreement was dated

Hispanic Health Council, Inc.

01/28/2014

175 Main Street

Hartford, CT 06106-

The rates approved in this agreement are for use on grants, contracts and other agreements with the Federal Government, subject to the conditions in Section III.

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**SECTION I: INDIRECT COST RATES**

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RATE TYPES:      FIXED              FINAL              PROV. (PROVISIONAL)      PRED. (PREDETERMINED)

EFFECTIVE PERIOD

<u>TYPE</u>	<u>FROM</u>	<u>TO</u>	<u>RATE(%)</u>	<u>LOCATION</u>	<u>APPLICABLE TO</u>
FINAL	07/01/2016	06/30/2017	25.00	On-Site	All Programs
PRED.	07/01/2017	06/30/2019	25.00	On-Site	All Programs
PROV.	07/01/2019	06/30/2021	25.00	On-Site	All Programs

\*BASE

Total direct costs excluding capital expenditures (buildings, individual items of equipment; alterations and renovations) and subawards.

ORGANIZATION: Hispanic Health Council, Inc.

AGREEMENT DATE: 7/31/2017

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**SECTION II: SPECIAL REMARKS**

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TREATMENT OF FRINGE BENEFITS:

Fringe benefits applicable to direct salaries and wages are treated as direct costs.

TREATMENT OF PAID ABSENCES

Vacation, holiday, sick leave pay and other paid absences are included in salaries and wages and are claimed on grants, contracts and other agreements as part of the normal cost for salaries and wages. Separate claims are not made for the cost of these paid absences.

Equipment means an article of nonexpendable, tangible personal property having a useful life of more than one year, and an acquisition cost of \$2,500 or more per unit.

\* Your next indirect cost proposal based on actual costs for the fiscal year ending 06/30/2018 is due in our office by 12/31/2018.





DEPARTMENT OF HEALTH & HUMAN SERVICES

Program Support Center  
Financial Management Portfolio  
Cost Allocation Services

26 Federal Plaza, Room 3412  
New York, NY 10278  
PHONE: (212) 264-2069  
FAX: (212) 264-5478  
EMAIL: CAS-NY@psc.hhs.gov

June 14, 2018

Mr. Charles Eaton, Controller  
University of Connecticut  
343 Mansfield Road, Unit 1074  
Storrs, CT 06269-1074

Dear Mr. Eaton:

A negotiation agreement is being sent to you for signature. This agreement reflects an understanding reached between your institution and a member of my staff concerning the rates or amounts that may be used to support your claim for costs on grants and contracts with the Federal Government. The agreement must be signed by a duly authorized representative of your institution and emailed to me; retain a copy for your file. Our email address is [cas-ny@psc.hhs.gov](mailto:cas-ny@psc.hhs.gov). We will reproduce and distribute the agreement to awarding agencies of the Federal Government for their use.

Requirements for adjustments to costs claimed under Federal Grants and Contracts resulting from this negotiation are dependent upon the type of rate contained in the negotiation agreement. Information relating to these requirements is enclosed.

In consideration of this negotiation, the following was agreed to:

1. The carry-forward under-recovery of \$358,432 resulting from the settlement of your actual Professional fringe benefit rate for fiscal year ended June 30, 2017 will be taken into consideration in computing the actual fringe benefit rate for your fiscal year ending June 30, 2019.
2. The carry-forward under-recovery of \$50,860 resulting from the settlement of your actual Faculty fringe benefit rate for fiscal year ended June 30, 2017 will be taken into consideration in computing the actual fringe benefit rate for your fiscal year ending June 30, 2019.
3. The carry-forward over-recovery of \$(884,784) resulting from the settlement of your actual Graduate Assistants fringe benefit rate for fiscal year ended June 30, 2017 will be taken into consideration in computing the actual fringe benefit rates for fiscal years ending June 30, 2019 \$(221,196) and June 30, 2021 \$(663,588).
4. The carry-forward under-recovery of \$555,995 resulting from the settlement of your actual Special Payroll fringe benefit rate for fiscal year ended June 30, 2017 will be taken into consideration in computing the actual fringe benefit rate for fiscal years ending June 30, 2019 \$138,999 and June 30, 2021 \$416,996.
5. The carry-forward over-recovery of \$(412) resulting from the settlement of your actual Student Labor fringe benefit rate for fiscal year ended June 30, 2017 will be taken into consideration in computing the actual fringe benefit rate for your fiscal year ending June 30, 2019.
6. Your fringe benefit proposal for your fiscal year ending June 30, 2018 will be due by December 31, 2018.

In addition, please acknowledge your concurrence with the comments and conditions cited above by

Mr. Charles Eaton

-2-

June 14, 2018

signing this letter in the space provided below and returning it to me via email, along with the enclosed negotiation agreement.

Sincerely,

Darryl W. Mayes -S

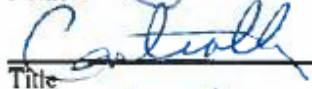
Darryl W. Mayes  
Deputy Director  
Cost Allocation Services

Enclosures

Concurrence:

 Charles Eaton

Name



Title

6/21/18

Date

**COLLEGES AND UNIVERSITIES RATE AGREEMENT**

EIN: 060772160

DATE:06/14/2018

**ORGANIZATION:**

University of Connecticut  
343 Mansfield Road, Unit 2074  
Storrs, CT 06269-2112

FILING REF.: The preceding  
agreement was dated  
06/02/2017

The rates approved in this agreement are for use on grants, contracts and other agreements with the Federal Government, subject to the conditions in Section III.

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**SECTION I: INDIRECT COST RATES**

RATE TYPES:	FIXED	FINAL	PROV. (PROVISIONAL)	PRED. (PREDETERMINED)
	<u>EFFECTIVE PERIOD</u>			
<u>TYPE</u>	<u>FROM</u>	<u>TO</u>	<u>RATE(%) LOCATION</u>	<u>APPLICABLE TO</u>
PRED.	07/01/2018	06/30/2019	59.50 On-Campus	Research
PRED.	07/01/2019	06/30/2020	61.00 On-Campus	Research
PRED.	07/01/2018	06/30/2020	26.00 Off-Campus	Research
PRED.	07/01/2018	06/30/2020	57.00 On-Campus	Instruction
PRED.	07/01/2018	06/30/2020	26.00 Off-Campus	Instruction
PRED.	07/01/2018	06/30/2020	35.00 On-Campus	Other Sponsored Programs
PRED.	07/01/2018	06/30/2020	26.00 Off-Campus	Other Sponsored Programs
PROV.	07/01/2020	Until Amended		Use same rates and conditions as those cited for fiscal year ending June 30, 2020.

ORGANIZATION: University of Connecticut

AGREEMENT DATE: 6/14/2018

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+BASE

Modified total direct costs, consisting of all direct salaries and wages, applicable fringe benefits, materials and supplies, services, travel and up to the first \$25,000 of each subaward (regardless of the period of performance of the subawards under the award). Modified total direct costs shall exclude equipment, capital expenditures, charges for patient care, rental costs, tuition remission, scholarships and fellowships, participant support costs and the portion of each subaward in excess of \$25,000. Other items may only be excluded when necessary to avoid a serious inequity in the distribution of indirect costs, and with the approval of the cognizant agency for indirect costs.

ORGANIZATION: University of Connecticut  
AGREEMENT DATE: 6/14/2018

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**SECTION I: FRINGE BENEFIT RATES\*\***

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<u>TYPE</u>	<u>FROM</u>	<u>TO</u>	<u>RATE(%)</u>	<u>LOCATION</u>	<u>APPLICABLE TO</u>
FIXED	7/1/2018	6/30/2019	72.00	All	Professional
FIXED	7/1/2018	6/30/2019	54.80	All	Faculty
FIXED	7/1/2018	6/30/2019	19.00	All	Graduate Assistants
FIXED	7/1/2018	6/30/2019	25.10	All	Special Payroll
FIXED	7/1/2018	6/30/2019	4.10	All	Student Labor
PROV.	7/1/2019	Until amended	68.60	All	Professional
PROV.	7/1/2019	Until amended	53.90	All	Faculty
PROV.	7/1/2019	Until amended	20.50	All	Graduate Assistants
PROV.	7/1/2019	Until amended	23.90	All	Special Payroll
PROV.	7/1/2019	Until amended	4.20	All	Student Labor

\*\* DESCRIPTION OF FRINGE BENEFITS RATE BASE:  
Salaries and wages.



ORGANIZATION: University of Connecticut

AGREEMENT DATE: 6/14/2018

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**SECTION II: SPECIAL REMARKS**

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TREATMENT OF FRINGE BENEFITS:

The fringe benefits are charged using the rate(s) listed in the Fringe Benefits Section of this Agreement. The fringe benefits included in the rate(s) are listed below.

TREATMENT OF PAID ABSENCES

Vacation, holiday, sick leave pay and other paid absences are included in salaries and wages and are claimed on grants, contracts and other agreements as part of the normal cost for salaries and wages. Separate claims are not made for the cost of these paid absences.

ORGANIZATION: University of Connecticut

AGREEMENT DATE: 6/14/2018

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(1) For all activities performed in facilities not owned by the institution and to which rent is directly allocated to the project(s), the off-campus rate will apply. Grants or contracts will not be subject to more than one indirect cost rate. If more than 50% of a project is performed off-campus, the off-campus rate will apply to the entire project.

(2) The Fringe Benefit rates include the following: Pension, Unemployment Compensation, Worker's Compensation, Health Services, Group Life Insurance, Social Security, and Medical Insurance.

(3) The following is a list of the locations to which the On-Campus indirect cost rate is applicable to:

Storrs - Main Campus  
Greater Hartford Campus:  
Hartford Branch  
School of Law  
School of Social Work  
School of Insurance  
Institute of Public Services

Southeastern Location:  
Groton, CT  
Southeastern Branch  
Marine Services Institute

Waterbury Branch, Torrington Branch, Stamford Branch

(4) Equipment means tangible personal property (including information technology systems) having a useful life of more than one year and a per-unit acquisition cost which equals or exceeds \$5,000.

(5) A fringe benefit proposal based on actual costs for the fiscal year ending June 30, 2018 is due by December 31, 2018. A Facilities & Administrative cost proposal based on actual costs for the fiscal year ending June 30, 2019 is due by December 31, 2019.

ORGANIZATION: University of Connecticut  
AGREEMENT DATE: 6/14/2018

**SECTION III: GENERAL**

**A. LIMITATIONS:**

The rates in this Agreement are subject to any statutory or administrative limitations and apply to a given grant, contract or other agreement only to the extent that funds are available. Acceptance of the rates is subject to the following conditions: (1) Only costs incurred by the organization were included in its facilities and administrative cost pools as finally accepted; such costs are legal obligations of the organization and are allowable under the governing cost principles; (2) The same costs that have been treated as facilities and administrative costs are not claimed as direct costs; (3) Similar types of costs have been accorded consistent accounting treatment; and (4) The information provided by the organization which was used to establish the rates is not later found to be materially incomplete or inaccurate by the Federal Government. In such situations the rate(s) would be subject to renegotiation at the discretion of the Federal Government.

**B. ACCOUNTING CHANGES:**

This Agreement is based on the accounting system purported by the organization to be in effect during the Agreement period. Changes to the method of accounting for costs which affect the amount of reimbursement resulting from the use of this Agreement require prior approval of the authorized representative of the cognizant agency. Such changes include, but are not limited to, changes in the charging of a particular type of cost from facilities and administrative to direct. Failure to obtain approval may result in cost disallowances.

**C. FIXED RATES:**

If a fixed rate in this Agreement, it is based on an estimate of the costs for the period covered by the rate. When the actual costs for this period are determined, an adjustment will be made to a rate of a future year(s) to compensate for the difference between the costs used to establish the fixed rate and actual costs.

**D. USE BY OTHER FEDERAL AGENCIES:**

The rates in this Agreement were approved in accordance with the authority in Title 2 of the Code of Federal Regulations, Part 200 (2 CFR 200), and should be applied to grants, contracts and other agreements covered by 2 CFR 200, subject to any limitations in A above. The organization may provide copies of the Agreement to other Federal Agencies to give them early notification of the Agreement.

**E. OTHER:**

If any Federal contract, grant or other agreement is reimbursing facilities and administrative costs by a means other than the approved rate(s) in this Agreement, the organization should (1) credit such costs to the affected program, and (2) apply the approved rate(s) to the appropriate base to identify the proper amount of facilities and administrative costs allocable to these programs.

BY THE INSTITUTION:

University of Connecticut

(INSTITUTION)

(SIGNATURE)

(NAME)

(TITLE)

(DATE)

ON BEHALF OF THE FEDERAL GOVERNMENT:

DEPARTMENT OF HEALTH AND HUMAN SERVICES

(AGENCY)

Darryl W. Mayes -S

(SIGNATURE)

Darryl W. Mayes

(NAME)

Deputy Director, Cost Allocation Services

(TITLE)

6/14/2018

(DATE) 7028

HHS REPRESENTATIVE: Michael Leonard

Telephone: (212) 264-2069



DEPARTMENT OF HEALTH & HUMAN SERVICES

Program Support Center  
Financial Management Portfolio  
Cost Allocation Services

26 Federal Plaza, Room 3412  
New York, NY 10278  
PHONE: (212) 264-2069  
FAX: (212) 264-5478  
EMAIL: CAS-NY@psc.hhs.gov

June 14, 2018

Mr. Charles Eaton, Controller  
University of Connecticut  
343 Mansfield Road, Unit 1074  
Storrs, CT 06269-1074

Dear Mr. Eaton:

A negotiation agreement is being sent to you for signature. This agreement reflects an understanding reached between your institution and a member of my staff concerning the rates or amounts that may be used to support your claim for costs on grants and contracts with the Federal Government. The agreement must be signed by a duly authorized representative of your institution and emailed to me; retain a copy for your file. Our email address is [cas-ny@psc.hhs.gov](mailto:cas-ny@psc.hhs.gov). We will reproduce and distribute the agreement to awarding agencies of the Federal Government for their use.

Requirements for adjustments to costs claimed under Federal Grants and Contracts resulting from this negotiation are dependent upon the type of rate contained in the negotiation agreement. Information relating to these requirements is enclosed.

In consideration of this negotiation, the following was agreed to:

1. The carry-forward under-recovery of \$358,432 resulting from the settlement of your actual Professional fringe benefit rate for fiscal year ended June 30, 2017 will be taken into consideration in computing the actual fringe benefit rate for your fiscal year ending June 30, 2019.
2. The carry-forward under-recovery of \$50,860 resulting from the settlement of your actual Faculty fringe benefit rate for fiscal year ended June 30, 2017 will be taken into consideration in computing the actual fringe benefit rate for your fiscal year ending June 30, 2019.
3. The carry-forward over-recovery of \$(884,784) resulting from the settlement of your actual Graduate Assistants fringe benefit rate for fiscal year ended June 30, 2017 will be taken into consideration in computing the actual fringe benefit rates for fiscal years ending June 30, 2019 \$(221,196) and June 30, 2021 \$(663,588).
4. The carry-forward under-recovery of \$555,995 resulting from the settlement of your actual Special Payroll fringe benefit rate for fiscal year ended June 30, 2017 will be taken into consideration in computing the actual fringe benefit rate for fiscal years ending June 30, 2019 \$138,999 and June 30, 2021 \$416,996.
5. The carry-forward over-recovery of \$(412) resulting from the settlement of your actual Student Labor fringe benefit rate for fiscal year ended June 30, 2017 will be taken into consideration in computing the actual fringe benefit rate for your fiscal year ending June 30, 2019.
6. Your fringe benefit proposal for your fiscal year ending June 30, 2018 will be due by December 31, 2018.

In addition, please acknowledge your concurrence with the comments and conditions cited above by





DEPARTMENT OF HEALTH & HUMAN SERVICES

Program Support Center  
Financial Management Portfolio  
Cost Allocation Services

26 Federal Plaza, Room 3412  
New York, NY 10278  
PHONE: (212) 264-2069  
EMAIL: CAS-NY@psc.hhs.gov

July 10, 2018

Ms. Julie Schwager  
Assistance Vice President  
University of Connecticut Health Center  
263 Farmington Avenue  
Farmington, CT 06030-3800

Dear Ms. Schwager:

A negotiation agreement is being sent to you for signature. This agreement reflects an understanding reached between your institution and a member of my staff concerning the rates or amounts that may be used to support your claim for costs on grants and contracts with the Federal Government. The agreement must be signed by a duly authorized representative of your institution and emailed to [CAS-NY@psc.hhs.gov](mailto:CAS-NY@psc.hhs.gov). We will reproduce and distribute the agreement to awarding agencies of the Federal Government for their use.

Requirements for adjustments to costs claimed under Federal Grants and Contracts resulting from this negotiation are dependent upon the type of rate contained in the negotiation agreement. Information relating to these requirements is enclosed.

In consideration of this negotiation agreement, the following was agreed to:

Attached are (6) documents entitled "Components of Published Facilities and Administrative Cost Rate (F&A)". There is one document issued for each F&A rate published on the rate agreement. These documents should be signed and sent back to this office along with the signed rate agreement.

An indirect cost rate proposal, together with the required supporting information, must be submitted to this office for each fiscal year in which your organization claims cost under grants and contracts awarded by the Federal Government.

Ms. Julie Schwager

-2-

July 10, 2018

Therefore, your next indirect cost proposal for the fiscal year ending June 30, 2020 will be due in our office by December 31, 2020. In addition, please acknowledge your concurrence with the comments and conditions cited above by signing this letter in the space provided below and transmitting electronically via email to CAS-NY@psc.hhs.gov.

Sincerely,  
Darryl W.  
Mayes -S

Digitally signed by Darryl W. Mayes -S  
DN: c=US, ou=U.S. Government, ou=HHS,  
ou=PS&C, ou=People,  
o=2242.1920100.100.1+2000181699  
, cn=Darryl W. Mayes -S  
Date: 2018.08.03 09:44:18 -0400

Darryl W. Mayes  
Deputy Director  
Cost Allocation Services

Enclosures

Concurrence:

  
Name

ASSISTANT VICE PRESIDENT  
Title FOC RESEARCH

8/17/18  
Date

**COLLEGES AND UNIVERSITIES RATE AGREEMENT**

EIN: 1521725543A1

DATE:07/10/2018

ORGANIZATION:

FILING REF.: The preceding agreement was dated 06/04/2018

University of Connecticut Health Center  
263 Farmington Avenue  
Farmington, CT 06030-3800

The rates approved in this agreement are for use on grants, contracts and other agreements with the Federal Government, subject to the conditions in Section III.

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**SECTION I: INDIRECT COST RATES**

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RATE TYPES:	FIXED	FINAL	PROV. (PROVISIONAL)	PRED. (PREDETERMINED)
	<u>EFFECTIVE PERIOD</u>			
	<u>FROM</u>	<u>TO</u>	<u>RATE(%)</u>	<u>LOCATION</u>
				<u>APPLICABLE TO</u>
FINAL	07/01/2017	06/30/2018	59.50	On-Campus
PRED.	07/01/2018	06/30/2019	62.50	On-Campus
PRED.	07/01/2019	06/30/2021	64.00	On-Campus
FINAL	07/01/2017	06/30/2018	26.00	Off-Campus
PRED.	07/01/2018	06/30/2021	26.00	Off-Campus
FINAL	07/01/2017	06/30/2018	49.00	On-Campus
PRED.	07/01/2018	06/30/2021	54.00	On-Campus
FINAL	07/01/2017	06/30/2018	26.00	Off-Campus
PRED.	07/01/2018	06/30/2021	26.00	Off-Campus
FINAL	07/01/2017	06/30/2018	39.00	On-Campus
PRED.	07/01/2018	06/30/2021	38.00	On-Campus
FINAL	07/01/2017	06/30/2018	26.00	Off-Campus
PRED.	07/01/2018	06/30/2021	26.00	Off-Campus
PROV.	07/01/2021	Until Amended		
				Use same rates and conditions as those cited for fiscal year ending June 30, 2021.

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ORGANIZATION: University of Connecticut Health Center  
AGREEMENT DATE: 7/10/2018

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\*BASE

Modified total direct costs, consisting of all direct salaries and wages, applicable fringe benefits, materials and supplies, services, travel and up to the first \$25,000 of each subaward (regardless of the period of performance of the subawards under the award). Modified total direct costs shall exclude equipment, capital expenditures, charges for patient care, rental costs, tuition remission, scholarships and fellowships, participant support costs and the portion of each subaward in excess of \$25,000. Other items may only be excluded when necessary to avoid a serious inequity in the distribution of indirect costs, and with the approval of the cognizant agency for indirect costs.

ORGANIZATION: University of Connecticut Health Center  
AGREEMENT DATE: 7/10/2018

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**SECTION I: FRINGE BENEFIT RATES\*\***

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<u>TYPE</u>	<u>FROM</u>	<u>TO</u>	<u>RATE(%)</u>	<u>LOCATION</u>	<u>APPLICABLE TO</u>
FIXED	7/1/2018	6/30/2019	38.70	All	Faculty
FIXED	7/1/2018	6/30/2019	66.90	All	Professional/ Managerial
FIXED	7/1/2018	6/30/2019	79.00	All	Classified
FIXED	7/1/2018	6/30/2019	17.90	All	Graduate Assistants
FIXED	7/1/2018	6/30/2019	8.30	All	Special Payroll
PROV.	7/1/2019	Until amended			Use same rates and conditions as those cited for fiscal year ending June 30, 2019.

\*\* DESCRIPTION OF FRINGE BENEFITS RATE BASE:  
Salaries and wages.

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(\*See Special Remarks)

ORGANIZATION: University of Connecticut Health Center  
AGREEMENT DATE: 7/10/2018

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**SECTION II: SPECIAL REMARKS**

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TREATMENT OF FRINGE BENEFITS:

The fringe benefits are charged using the rate(s) listed in the Fringe Benefits Section of this Agreement. The fringe benefits included in the rate(s) are listed below.

TREATMENT OF PAID ABSENCES

Vacation, holiday, sick leave pay and other paid absences are included in salaries and wages and are claimed on grants, contracts and other agreements as part of the normal cost for salaries and wages. Separate claims are not made for the cost of these paid absences.

OFF-CAMPUS DEFINITION: For all activities performed in facilities not owned by the institution and to which rent is directly allocated to the project(s), the off-campus rate will apply. Actual costs will be apportioned between on-campus and off-campus components. Each portion will bear the appropriate rate.

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Effective 7/1/2018:

OFF-CAMPUS DEFINITION: For all activities performed in facilities not owned by the institution and to which rent is directly allocated to the project(s) the off-campus rate will apply. Grants or contracts will not be subject to more than one F&A cost rate. If more than 50% of a project is performed off-campus, the off-campus rate will apply to the entire project.

(1) The following fringe benefits are included in the fringe benefit rates: Retirement, State Unemployment Insurance, Medical/Dental Insurance, Social Security, Life Insurance, Long Term Disability, Separation Costs, Sabbatical Costs and Workers' Compensation.

(2) Equipment means an article of nonexpendable, tangible personal property having a useful life of more than one year, and an acquisition cost of \$5,000 or more per unit.

ORGANIZATION: University of Connecticut Health Center  
AGREEMENT DATE: 7/10/2018

**SECTION III: GENERAL**

**A. LIMITATIONS:**

The rates in this Agreement are subject to any statutory or administrative limitations and apply to a given grant, contract or other agreement only to the extent that funds are available. Acceptance of the rates is subject to the following conditions: (1) Only costs incurred by the organization were included in its facilities and administrative cost pools as finally accepted; such costs are legal obligations of the organization and are allowable under the governing cost principles; (2) The same costs that have been treated as facilities and administrative costs are not claimed as direct costs; (3) Similar types of costs have been accorded consistent accounting treatment; and (4) The information provided by the organization which was used to establish the rates is not later found to be materially incomplete or inaccurate by the Federal Government. In such situations the rate(s) would be subject to renegotiation at the discretion of the Federal Government.

**B. ACCOUNTING CHANGES:**

This Agreement is based on the accounting system purported by the organization to be in effect during the Agreement period. Changes to the method of accounting for costs which affect the amount of reimbursement resulting from the use of this Agreement require prior approval of the authorized representative of the cognizant agency. Such changes include, but are not limited to, changes in the charging of a particular type of cost from facilities and administrative to direct. Failure to obtain approval may result in cost disallowances.

**C. FIXED RATES:**

If a fixed rate is in this Agreement, it is based on an estimate of the costs for the period covered by the rate. When the actual costs for this period are determined, an adjustment will be made to a rate of a future year(s) to compensate for the difference between the costs used to establish the fixed rate and actual costs.

**D. USE BY OTHER FEDERAL AGENCIES:**

The rates in this Agreement were approved in accordance with the authority in Title 2 of the Code of Federal Regulations, Part 200 (2 CFR 200), and should be applied to grants, contracts and other agreements covered by 2 CFR 200, subject to any limitations in A above. The organization may provide copies of the Agreement to other Federal Agencies to give them early notification of the Agreement.

**E. OTHER:**

If any Federal contract, grant or other agreement is reimbursing facilities and administrative costs by a means other than the approved rate(s) in this Agreement, the organization should (1) credit such costs to the affected programs, and (2) apply the approved rate(s) to the appropriate base to identify the proper amount of facilities and administrative costs allocable to these programs.

BY THE INSTITUTION:

University of Connecticut Health Center

(INSTITUTION)



(SIGNATURE)

Julie D. Schwabke

(NAME)

Assistant Vice President for Research

(TITLE)

8/17/18

(DATE)

ON BEHALF OF THE FEDERAL GOVERNMENT:

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Darryl W. Mayes - S

Digitally signed by Darryl W. Mayes - S  
DN: cn=Darryl W. Mayes - S, o=U.S. Government, ou=HHS,  
ou=FSC, ou=People,  
0.9.2342.19200100.1001.1.1=269813160,  
c=Darryl W. Mayes - S  
Date: 2018.08.03 09:45:34 -0400

(SIGNATURE)

Darryl W. Mayes

(NAME)

Deputy Director, Cost Allocation Services

(TITLE)

7/10/2018

(DATE) 7029

HHS REPRESENTATIVE: Edwin Miranda

Telephone: (212) 264-2069

Components of Published Facilities & Administrative Cost Rate

Institution: University of Connecticut Health Center

FY Covered by Rate: 7/1/17 - 7/1/18 -  
Rate type: Predetermined 6/30/18 6/30/21

Rate Component

1. Depreciation - Bldgs & Improvements	3.0%	5.7%
2. Depreciation - Equipment	1.3%	1.3%
3. Operation & Maintenance	13.0%	14.6%
4. Interest	0.7%	1.4%
5. Library	5.0%	5.0%
6. General Administration	0.0%	0.0%
7. Departmental Administration	26.0%	26.0%
8. Sponsored Projects Administration	0.0%	0.0%
9. Utility Cost Allowance	0.0%	0.0%
<b>Published On-Campus Rate- Instruction</b>	<b>49.0%</b>	<b>54.0%</b>

\* Reflects provisions of Appendix III to Part 200 of Uniform Guidance—Indirect (F&A) Costs Identification and Assignment, and Rate termination for Institutions of Higher Education (IHEs), C.8. dated December 26, 2013.

Name  Julie D. Schwagerl

Title Assistant Vice President for Research

Date 8/17/18

Components of Published Facilities & Administrative Cost Rate

Institution: University of Connecticut Health Center

FY Covered by Rate: 7/1/17 -

Rate type: Predetermined 6/30/21

Rate Component

1. Depreciation - Bldgs & Improvements	0.0%	
2. Depreciation - Equipment	0.0%	
3. Operation & Maintenance	0.0%	
4. Interest	0.0%	
5. Library	0.0%	
6. General Administration	0.0%	*
7. Departmental Administration	26.0%	*
8. Sponsored Projects Administration	0.0%	*
9. Student Services	<u>0.0%</u>	
Published Off-Campus Rate- Instruction	<u>26.0%</u>	

\* Reflects provisions of Appendix III to Part 200 of Uniform Guidance—Indirect (F&A) Costs Identification and Assignment, and Rate termination for Institutions of Higher Education (IHEs), C.B. dated December 26, 2013.

Name

JULIE NSCHWAGER

Title

ASSISTANT VICE PRESIDENT FOR RESEARCH

Date

8/17/18

Components of Published Facilities & Administrative Cost Rate

Institution: University of Connecticut Health Center

<u>FY Covered by Rate:</u>	7/1/17 -	7/1/18 -	7/1/19 -
<u>Rate type: Predetermined</u>	6/30/18	6/30/19	6/30/21

<u>Rate Component</u>				
1. Depreciation - Bldgs & Improvements	5.3%	6.1%	6.9%	
2. Depreciation - Equipment	3.0%	3.0%	3.0%	
3. Operation & Maintenance	19.4%	20.5%	21.0%	
4. Interest	2.0%	2.7%	2.9%	
5. Library	2.5%	2.9%	2.9%	
6. General Administration	0.0%	0.0%	0.0%	*
7. Departmental Administration	26.0%	26.0%	26.0%	*
8. Sponsored Projects Administration	0.0%	0.0%	0.0%	*
9. Utility Cost Allowance	1.3%	1.3%	1.3%	
<b>Published On-Campus Rate- Research</b>	<b>59.5%</b>	<b>62.5%</b>	<b>64.0%</b>	

\* Reflects provisions of Appendix III to Part 200 of Uniform Guidance—Indirect (F&A) Costs Identification and Assignment, and Rate termination for Institutions of Higher Education (IHEs), C.B. dated December 26, 2013.

Name  JULIE D. SCHWAGER

Title ASSISTANT VICE PRESIDENT FOR RESEARCH

Date 8/17/18

Components of Published Facilities & Administrative Cost Rate

Institution: University of Connecticut Health Center


FY Covered by Rate: 7/1/17 -

Rate type: Predetermined 6/30/21

Rate Component

1. Depreciation - Bldgs & Improvements	0.0%	
2. Depreciation - Equipment	0.0%	
3. Operation & Maintenance	0.0%	
4. Interest	0.0%	
5. Library	0.0%	
6. General Administration	0.0%	*
7. Departmental Administration	26.0%	*
8. Sponsored Projects Administration	0.0%	*
9. Utility Cost Allowance	<u>0.0%</u>	
Published Off-Campus Rate- Research	<u>26.0%</u>	

\* Reflects provisions of Appendix III to Part 200 of Uniform Guidance—Indirect (F&A) Costs Identification and Assignment, and Rate termination for Institutions of Higher Education (IHEs), C.8. dated December 26, 2013.

Name  Julie D. Schwager

Title ASSISTANT VICE PRESIDENT FOR RESEARCH

Date 8/17/18




Components of Published Facilities & Administrative Cost Rate

Institution: University of Connecticut Health Center

FY Covered by Rate: 7/1/17 - 7/1/18 -  
Rate type: Predetermined 6/30/18 6/30/21

<u>Rate Component</u>		
1. Depreciation - Bldgs & Improvements	1.10%	1.10%
2. Depreciation - Equipment	0.30%	0.10%
3. Operation & Maintenance	5.20%	5.50%
4. Interest	0.30%	0.20%
5. Library	6.10%	5.10%
6. General Administration	0.00%	0.00%
7. Departmental Administration	26.00%	26.00%
8. Sponsored Projects Administration	0.00%	0.00%
9. Student Services	0.00%	0.00%
Published On-Campus Rate- Other Sponsored Programs	<u>39.0%</u>	<u>38.0%</u>

\* Reflects provisions of Appendix III to Part 200 of Uniform Guidance—Indirect (F&A) Costs Identification and Assignment, and Rate termination for Institutions of Higher Education (IHEs), C.B. dated December 26, 2013.

Name  JULIE D. SCHWARTZ

Title ASSISTANT VICE PRESIDENT FOR RESEARCH

Date 8/17/18

Components of Published Facilities & Administrative Cost Rate

Institution: University of Connecticut Health Center

FY Covered by Rate: 7/1/17 -  
Rate type: Predetermined 6/30/21

Rate Component

1. Depreciation - Bldgs & Improvements	0.0%	
2. Depreciation - Equipment	0.0%	
3. Operation & Maintenance	0.0%	
4. Interest	0.0%	
5. Library	0.0%	
6. General Administration	0.0%	*
7. Departmental Administration	26.0%	*
8. Sponsored Projects Administration	0.0%	*
9. Student Services	<u>0.0%</u>	
Published Off-Campus Rate- Other	<u>26.0%</u>	
Sponsored Programs		

\* Reflects provisions of Appendix III to Part 200 of Uniform Guidance—Indirect (F&A) Costs Identification and Assignment, and Rate termination for Institutions of Higher Education (IHEs), C.B. dated December 26, 2013.

Name  JULIE D. SCHWAGER

Title ASSISTANT VICE PRESIDENT FOR RESEARCH

Date 8/17/18

Office of the Vice President for Research

- Service Units > Sponsored Program Services
- > Proposals
- > Proposal Preparation & Submission Overview
- > General Cost Principles
- > Budgeting & Costing Guide

UCONN

- Proposal Prep & Submission** ▾
  - Overview
  - PI Eligibility
  - Procedures & Policy
- Development ▾
- Budgeting ▾
  - Overview
  - General Cost Principles
  - Budgeting & Costing ▾
    - Budgeting & Costing Guide**
    - Salaries
    - Fringe Benefits
    - Other Direct Costs
    - Facilities and Administration (F&A) Costs
    - Cost Sharing
    - Budget Justification
    - Active and Pending

# Budgeting & Costing Guide

## Fringe Benefits

- The Sponsored Program rates provided below are consistent with the current [Cost/Indirect Cost Rate Agreement .pdf](#) and negotiations with the Department of Health and Human Services, and the University's standard projected fringe benefit increases for future budget years. The Sponsored Program rates should be used when developing sponsor paid budgets. Please see information from the Controller regarding [Fiscal 2019 Approved Sponsored Fringe Rates](#).
- The University rates provided below should be used when developing cost share budgets.

### Sponsored Program Fringe Benefit Rates and Projections (%)<sup>1</sup>

Description	FY18	FY19	FY20*	FY21*	FY22*
<b>Faculty</b>	55.6	54.8	56.0	57.0	58.0
<b>Professional/Classified</b>	67.3	72.0	73.8	75.0	76.0
<b>Special Payroll<sup>2</sup></b>	25.3	25.1	28.7	30.0	31.0
<b>Post Docs</b>	19.3	19.0	19.8	21.0	22.0
<b>Graduate Assistant, Acad. Year</b>	19.3	19.0	19.8	21.0	22.0
<b>Student Labor</b>	3.7	4.1	4.3	4.4	4.5

- Support
- Foreign Collaborations
- Submission
- Electronic Proposal Systems ▾
- Policies & Procedures
- Forms
- Budget Templates/Calculators
- Uniform Guidance
- Frequently Requested Information
- Contacts

1. Rates refer to grant funding sources only. See the [Budget and Planning website](#) for non-grant rates.

2. Examples: Summer faculty, other state agency employees, state retirees, summer grad students

\* FY20 – FY22 rates shown are projected estimates for budgeting purposes only.

**University Fringe Benefit Rates and Projections (%)**

Description	FY18	FY19	FY20	FY21	FY22
Faculty	49.0	49.9	51.3	53.3	55.3
Professional	65.0	65.6	75.8	77.8	79.8
Classified	96.2	96.4	98.8	98.8	98.8
Special Payroll	23.6	23.6	23.6	25.6	27.6
Post Docs	29.5	33.3	33.3	35.3	37.3
Graduate Assistant, Acad. Year	18.0	18.0	18.0	20.0	22.0
Student Labor	0.0	0.0	0.0	0.0	0.0

**Salaries**

- A 5% annual increase is recommended and should be applied to personnel salary projections for future budget years for all sponsors except NIH.
- A 3% annual increase is recommended and should be applied to personnel salary projections for future budget years for NIH.
- A 2% annual increase is recommended and should be applied to graduate assistant stipends for future budget years for all sponsors.

**Graduate Assistant Stipends**

A full time graduate assistant devotes one-half time to studies (approximately 20 hours per week) and one half-time to graduate assistant duties. During the summer, graduate assistants are put on special payroll and can work 40 hours per week. Refer to the [Graduate School website](#) for additional information regarding graduate assistants. If applying for an individual fellowship or training grant from NIH, refer to the [NRSA requirements](#) for stipend, tuition, and institutional allowance.

In accordance with the Graduate Employee Union Contract, the following stipends represent the minimum stipends for graduate assistants. *Estimates are for proposal development only*<sup>†</sup>

	Calendar 50% (20 Hrs)	Academic 50% (20 Hrs)	Summer 3 Months (20 Hrs)	Summer 3 Months (40 Hrs)	Bi-Weekly Pay Periods
<b>Stipends for Academic Year August 2018 – May 2019</b>					
<b>LEVEL I</b>	\$31,158	\$23,369	\$7,910	\$15,820	\$1,198.39
<b>LEVEL II</b>	\$32,786	\$24,590	\$8,322	\$16,644	\$1,261.00
<b>LEVEL III</b>	\$36,451	\$27,338	\$9,252	\$18,505	\$1,401.97
<b>Stipends for Academic Year August 2019 – May 2020 (2% projected increase)</b>					
<b>LEVEL I</b>	\$31,781	\$23,836	\$8,068	\$16,136	\$1,222.39
<b>LEVEL II</b>	\$33,442	\$25,082	\$8,488	\$16,977	\$1,286.24
<b>LEVEL III</b>	\$37,180	\$27,885	\$9,437	\$18,875	\$1,430.04
<b>Stipends for Academic Year August 2020 – May 2021 (2% projected increase)</b>					
<b>LEVEL I</b>	\$32,417	\$24,313	\$8,229	\$16,459	\$1,246.85
<b>LEVEL II</b>	\$34,111	\$25,584	\$8,658	\$17,317	\$1,311.97
<b>LEVEL III</b>	\$37,924	\$28,443	\$9,626	\$19,253	\$1,458.66
<b>Stipends for Academic Year August 2021 – May 2022 (2% projected increase)</b>					
<b>LEVEL I</b>	\$33,065	\$24,799	\$8,394	\$16,788	\$1,271.81
<b>LEVEL II</b>	\$34,793	\$26,096	\$8,831	\$17,663	\$1,338.24
<b>LEVEL III</b>	\$38,682	\$29,012	\$9,819	\$19,638	\$1,487.85

**Graduate Assistant Stipend Level Description:**

- LEVEL I – Graduate assistants with at least the baccalaureate degree.
- LEVEL II – Experienced graduate assistants in a doctoral program with at least the master's degree or its equivalent in the field of graduate study. Equivalency consists of 30 graduate level content course credits of appropriate course work beyond the baccalaureate degree completed at the University of Connecticut, together with admission to a doctoral program.
- LEVEL III – For students with experience as graduate assistants who have at least the master's degree or its equivalent and who have passed the doctoral general examination.

Actual Semester Dates *(The months of June, July & August should be used for budgeting purposes for the summer period)*

† Please refer to the [Payroll website](#) for updated stipend information.

**Post Doctoral Fellow Stipends**

- Below are the current National Research Service Award (NRSA) Post Doctoral Fellow stipend levels that should be taken into consideration when preparing your proposal budget. These stipend levels must be used when applying to the NRSA for support. Stipend levels can also be found on the [NIH website](#).
- Use of the stipend level which is consistent with the intended postdoctoral years of experience is recommended for use with other support sources, however, in accordance with [University policy](#), the stipend level must at least be equal to the minimum NRSA rate.
- For more information, visit the [Graduate School Post Doc Policies](#).

Years of Experience	Stipend
0	\$50,004
1	\$50,376
2	\$50,760
3	\$52,896
4	\$54,756
5	\$56,880

6 \$59,100

7+ \$61,308

**Student Labor Pay Scale**

Student Labor and Work-Study are paid based on an established pay scale determined by the Office of Student Employment [☞](#). The rate of pay for a position is based on the skills and level of experience required for the position, regardless of whether earnings are paid through the work-study or student labor payrolls. The pay rate is determined by the hiring supervisor and is subject to approval by the student employment staff in the Office of [Student Financial Aid Services](#) [☞](#).

Class	Requirement	Pay Rate
I	The position does not require a specific degree of skill or prior work experience.	\$10.10
II	The position requires a reasonable degree of skill, prior experience and a fair amount of responsibility.	\$10.25 – \$11.45
III	The position requires a high degree of skill and entails an extensive amount of responsibility.	\$11.50 – \$13.45
IV	The position requires advanced skill, market/environmental demand, knowledge and/or training in a scientific, academic or specialized study.	\$13.50 – \$28.80

**NIH Salary Cap**


Effective January 6, 2019, the NIH salary limitation for Executive Level 2 was increased to \$192,300. For additional information, please refer to NIH Notice: [NOTHS-19-013](#) [☞](#). Note this salary cap applies to all [DHHS agencies](#) [☞](#).

**Facilities and Administration (F&A Costs)**

- Proposals submitted to Sponsored Program Services after October 14, 2016 must use the appropriate F&A rate in accordance with the most recently negotiated rate agreement and University policy.
- Proposals submitted to Sponsored Program Services on or before October 14, 2016 may use F&A rates in accordance with the agreement dated 4/19/16. These pending proposals will be grandfathered at the proposed rate in all cases where re-budgeting to support the current rate would reduce the amount of direct costs.

**Federal & Corporate Rates**

	Rate Base*	07/01/15 06/30/16	07/01/16 06/30/17	07/01/17 06/30/18	07/01/18 06/30/19	07/01/ 06/30/
		-	-	-	-	-
<b>Research</b>						
<b>On Campus</b>	MTDC	58.0%	59.5%	59.5%	59.5%	61.0%
<b>Off Campus<sup>(2)</sup></b>	MTDC	26.0%	26.0%	26.0%	26.0%	26.0%
<b>Instruction</b>						
<b>On Campus</b>	MTDC	63.0%	57.0%	57.0%	57.0%	57.0%
<b>Off Campus<sup>(2)</sup></b>	MTDC	26.0%	26.0%	26.0%	26.0%	26.0%
<b>Other Sponsored Activities</b>						
<b>On Campus</b>	MTDC	29.2%	35.0%	35.0%	35.0%	35.0%
<b>Off Campus<sup>(2)</sup></b>	MTDC	26.0%	26.0%	26.0%	26.0%	26.0%

The University's F&A Agreement, negotiated with the Department of Health and Human Services: [Cost/Indirect Cost Rate Agreement .pdf](#) 

- F&A costs are calculated on Modified Total Direct Cost (MTDC) which is Direct Costs minus certain exclusions. Direct Costs include salary, fringe benefits, materials and supplies, travel, and the first \$25,000 of each subcontract, etc.
- Exclusions include equipment over \$5,000\*, rent, Specialized Service Facilities, fellowships, tuition, participant support costs and subcontract amounts beyond the first \$25,000 for each subcontract.

*\*In order to be consistent with State classification standards, the dollar threshold for capitalization of equipment at UConn is \$5,000.*

**Off Campus Rate**

In accordance with our current F&A Rate Agreement:

*For all activities performed in facilities not owned by the institution and to which rent is directly allocated to the project(s), the off campus rate will apply. Grants or contracts will not be subject to more than one F&A rate. If more than 50% of*



I  
a project is performed off campus, the off campus rate will apply to the entire project.

The off campus indirect cost rate can be budgeted as follows:

- If rent is directly charged to the project.
- If more than 50% of all program activities are performed off campus. (We request written confirmation from the PI).
- If the sponsor specifically requires the off campus rate per the solicitation.

The on campus rate is normally applied whenever the University leases or pays for space costs that are not direct charged to a grant or contract.

If you have questions, please contact your SPS Grants/Contracts Specialist.


### **Sponsor Stated Limits**

When the University collects F&A costs at less than the full federally negotiated rates, F&A costs are charged to Total Direct Costs (including equipment, subcontracts, etc.,) unless otherwise stated in the sponsor guidelines.


Funding from state agency appropriations and local municipalities are charged a current reduced rate of 20%. F&A costs should be charged to Total Direct Costs.

### **Reduction of F&A on Projects Having a Total Cost of \$50k or Less**

To allow for more buying power on small sponsored projects and to help foster smaller awards which may lead to additional funding, F&A on new awards received after October 1, 2017 with total costs of \$50,000 or less, will be reduced to 20% or the difference between the full F&A rate and 20% will be distributed to the investigators F&A account. F&A costs are charged to Total Direct Costs (TDC) or Modified Total Direct Costs (MTDC) as required by the specific sponsor or solicitation.

Sponsored Program Services (SPS) has developed [guidance and FAQs .pdf](#)  on how this program will be implemented.

### **Animal Per Diem Rates**

Animal per diem rates are available on the [Animal Care Services website](#) .



Office of the Vice  
President for Research

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## Appendix B-Conference Agenda

Hispanic Health Council, Husky Nutrition Programs and Department of Social Services

## SAVE THE DATE!

Sheraton San Diego Hotel & Resort, San Diego, CA




## Appendix C - SNAP Ed Signatures

### Supplemental Nutrition Assistance Program Annual Plan for SNAP-Ed

*State Agency: State of Connecticut-Department of Social Services*

*Date: October 29, 2019*

*Federal Fiscal Year: 2020*

*Certified By:*  **Michael J. Gilbert, Director-Division of Financial Services**

*Date: October 29, 2019*

**SNAP STATE AGENCY FISCAL REVIEWER**

*Date: October 29, 2019*