

SNAP-Ed Strategies and Interventions:

An Obesity Prevention Toolkit for States

Evidence-based Policy and Environmental Change in Child Care, School, Community, and Family Settings

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This toolkit is a collaborative effort between: USDA





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INTRODUCTION

Welcome to the United States Department of Agriculture (USDA) Supplemental Nutrition Assistance Program Education (SNAP-Ed) obesity prevention toolkit. This toolkit was developed by USDA, its Food and Nutrition Service (FNS), and the National Collaborative on Childhood Obesity Research (NCCOR), a partnership between the Centers for Disease Control and Prevention (CDC), the National Institutes of Health (NIH), the Robert Wood Johnson Foundation, and USDA. The toolkit was designed to help States identify evidenced-based obesity prevention policy and environmental change strategies and interventions to include in their SNAP-Ed plans for Fiscal Year (FY) 2014 and beyond. The Healthy Hunger Free Kids Act, Sec.241, transformed SNAP-Ed into a Nutrition Education and Obesity Prevention Grant Program, explicitly adopting obesity prevention as a major emphasis and embracing comprehensive community-based and public health approaches. The Act required FNS to consult with the Director of CDC and other stakeholders to identify evidenced-based strategies to incorporate into SNAP-Ed programming.

SNAP-Ed Guidance details the goal, focus, and key behavioral outcomes for SNAP-Ed programming. CDC has identified five target behaviors for obesity prevention and control. These target behaviors align with SNAP-Ed's focus and priorities. Table 1 (p.3) lists those behaviors and provides environmental and policy strategies to address those behaviors. CDC believes that these strategies will have a much broader population impact, be less costly, more sustainable, and less prone to stigmatize obese individuals than programs focused on individual behavior change.

USDA engaged NCCOR to identify evidenced-based obesity prevention strategies and interventions appropriate for SNAP-Ed. USDA also sought and received help from the Center for Training and Research Translation (Center TRT) at the University of North Carolina's Prevention Research Center. NCCOR and CenterTRT identified an initial set of more than 30 interventions, which FNS reviewed and believes can be SNAP-Ed appropriate and can be incorporated into State SNAP-Ed Plans. These strategies and interventions, along with additional resources, are listed in this toolkit. They are categorized by setting or focus area and include schools, childcare, communities, helping families, and social marketing and media. Each intervention includes an Internet link connecting to additional materials and resources that can help SNAP-Ed programs decide which interventions to use to assist in State obesity prevention efforts.

FNS encourages States to consider and select interventions appropriate for their States to include in their SNAP-Ed Plans. FNS's Regional SNAP-Ed Coordinators can serve as a resource to help States select interventions from the toolkit that best meet the needs of the State. An effective obesity prevention program will use interventions across several settings. While the evidence does not identify a specific number of interventions or settings necessary for an effective obesity prevention program, it does indicate that one or two interventions limited to a single setting are less likely to be effective. A comprehensive obesity prevention program with multiple interventions across several settings has been shown to be more effective.

States may use the toolkit to identify interventions that will complement the healthy eating recommendations of the Dietary Guidelines for Americans and messages from USDA's nutrition assistance programs such the Special Supplemental Food Program for Women, Infants and Children (WIC), the Child and Adult Care Food Program (CACFP), and the School Meals Programs, as well as

SNAP. To foster collaborative relationships and to determine which interventions might best fit the needs of the State's low-income population, FNS suggests that State SNAP-Ed officials consult with other State nutrition assistance program officials before choosing interventions from this toolkit to include in SNAP-Ed Plans.

In accordance with SNAP-Ed Guidance, States should identify other organizations to coordinate collaborative obesity prevention activities within their States. For example, States with CDC Obesity Prevention Plans should ensure that their SNAP-Ed obesity prevention interventions complement and not duplicate CDC obesity plan activities.

This toolkit is a dynamic document. It is not an exhaustive compilation of potential strategies and interventions that are appropriate for SNAP-Ed. States are reminded that activities should be conducted according to <u>SNAP-Ed Guidance</u> and other policy, considering the program's low-income target population. FNS is offering the toolkit as a starting point for ideas that States may use to further their obesity prevention efforts through SNAP-Ed. USDA will continue to work with NCCOR to refine and update the toolkit to ensure it provides a current list of evidenced-based strategies, interventions, and resources. Visit the <u>SNAP-Ed Connection</u> regularly as new strategies, interventions, and resources will be clearly identified in the toolkit and posted throughout the year.

This update to the toolkit adds a section on evaluation of SNAP-Ed interventions that may be considered along with evaluation recommendations and requirements contained in SNAP-Ed Guidance. SNAP-Ed may cover costs associated with well-designed evaluations and FNS encourages States to include them in their SNAP-Ed Plans as appropriate.

Effective evaluation will help to build the evidence-base and identify effective and promising obesity prevention strategies and interventions. Knowledge on effective obesity prevention strategies and interventions is evolving. Examples of success can be found across the nation in States, cities, towns, tribes, and communities. But there is still much to learn. Adding evaluations to State SNAP-Ed Plans will help to identify promising practices needed to meet the goal of solving the problem of childhood obesity within a generation.

Table 1. Target Behaviors and Obesity Prevention and Control Strategies from CDC's National Center for			
Chronic Disease Prevention and Health Promotion			
Target Behavior	Priority Strategies		
Physical Activity	Implement early care and education standards		
Increases energy expenditure and reduces	for physical activity		
obesity associated comorbidities	Implement quality physical education and		
	physical activity in K-12 schools		
	 Develop, implement, and evaluate 		
	comprehensive school physical activity		
	programs (CSPAP). CSPAP includes		
	quality physical education and physical		
	activity programming before, during,		
	and after school, such as recess,		
	classroom activity breaks, walk/bicycle		
	to school, physical activity clubs).		
	Promote adoption of physical activity in		
	worksites		
	Increase physical activity access and outreach		
	 Create or enhance access to places for 		
	physical activity with a focus on walking		
	combined with informational outreach		
	 Design streets and communities for 		
	physical activity		
Breastfeeding	Increase access to breastfeeding friendly		
Lowers prevalence of obesity in breastfed	environments		
children	 Implement practices supportive of 		
	breastfeeding in birthing facilities		
	 Provide access to professional and peer 		
	support for breastfeeding		
	 Ensure workplace compliance with 		
	federal lactation accommodation law		
Good Nutrition	Create supportive nutrition environments in		
Reduces the risk of obesity in children and adults	schools		
(USDA selected messages for consumers)	 Implement policies and practices that 		
	create a supportive nutrition		
Increase Fruit and Vegetable Consumption	environment, including establishing		
(Make half your plate fruits and vegetables)	standards for <u>all</u> competitive foods;		
	prohibit advertising of unhealthy foods;		
Increase Healthy Beverage Consumption	and promote healthy foods in schools,		
(Drink water instead of sugary drinks)	including those sold and served within		
	school meal programs and other		
Eat Fewer Energy-Dense Foods, Reduce Calories	venues		
(Switch to fat-free or low-fat (1%) milk; Enjoy	Increase access to healthy foods and beverages		
your food, but eat less; Avoid oversized portions))	 Provide access to healthier food retail 		
	 Provide access to farmers markets 		
Reduce Sodium	Implement food service guidelines/nutrition		
(Compare sodium in foods like soup, bread, and	standards in priority settings (early care and		
frozen meals-and choose foods with lower	education, worksites, communities) where		
numbers)	foods and beverages are available.		

EVALUATION

Evaluation in the SNAP-Ed Program – Why is it Important?

What is evaluation and why is it important to invest time and resources on evaluation in your SNAP-Ed Plans?

Evaluation:

- Is a systematic process that uses objective data to learn about the strengths and weaknesses of programs and practices.
- Is essential to learn what works and how well it works so that you can direct SNAP-Ed resources to the most effective programs. In other words, evaluation is needed for effective project/program management, for insuring project/program efficiency, and importantly, for program accountability.
- Evaluation data is important as part of a continuous improvement cycle to improve SNAP-Ed interventions over time.
- Evaluation can help achieve greater positive impact on the nutrition and health of lowincome individuals, families, and their communities.

What are the characteristics of a good evaluation?

A good evaluation:

- Provides practical information that is useful for decision making, such as whether to keep, expand, modify, or drop a program.
- Is planned at the outset of the program or as early as possible in the process.
- Provides timely information for decision making.
- Includes outcome data that is closely tied to the program, rather than other influences, and that measures outcomes that are realistic given the intervention.
- Measures characteristics that are associated with the practical implementation of the program (process evaluation) not just the program outcomes.
- Uses validated data collection instruments or conducts formative research when developing new data collection tools for the intervention.
- Has a sound study design that allows one to attribute the evaluation findings to the intervention.
- Uses clearly stated research objectives that are SMART (specific, measurable, achievable, realistic, and time specific).
- Predetermines the sample size needed to measure the expected effect(s) of the intervention. Is informed by or builds on previous research.
- Makes use, when possible, of multiple data sources such as surveys, interviews, observations, and administrative data, if available.
 For additional information on conducting sound evaluations see
 <u>http://www.fns.usda.gov/Ora/menu/Published/NutritionEducation/Files/EvaluationPrinciples.pdf</u>

How can the RE-AIM model be used to help design an evaluation? A program that is effective but is totally impractical to implement or sustain is of little value. The RE-AIM model (<u>http://www.re-aim.org/</u>) helps structure the evaluation to answer practical questions about program implementation and sustainability. Components of the RE-AIM model include:

- **REACH**: reaching the intended population including those at greatest risk.
- **EFFECTIVENESS**: the impact on nutrition, physical activity, obesity, and health.
- **ADOPTION**: the ability and willingness of organizations (child care, schools, worksites) to initiate the intervention.
- **IMPLEMENTATION**: the ability to deliver an evidence-based intervention as designed.
- **MAINTENANCE**: the long term enforcement and sustainability of the intervention.

What are the costs associated with a good evaluation and what assistance is available for this work?

- Some experts recommend spending 7-10% of the program budget on evaluation. This is an allowable expense under SNAP-Ed.
 - There are evaluation experts with experience in community-based evaluation programs like SNAP-Ed in your state or a neighboring state who can help you evaluate your SNAP-Ed interventions (see resources at the end of p.6).
 - Your state university extension service can be a good resource.
 - <u>CDC Prevention Research Centers</u> are well positioned to assist with communitybased evaluation for programs like SNAP-Ed.
- Starting by examining what is already known in these areas may also be helpful. The Guide to Community Preventive Services (Community Guide), the National Cancer Institute's Research Tested Intervention Programs, the CenterTRT strategies and interventions, and other evidence reviews about what is already known can be found here:
 - o http://www.thecommunityguide.org/pa/
 - o <u>http://rtips.cancer.gov/rtips/index.do</u>,
 - o http://centertrt.org/

Are there evaluation costs SNAP-Ed cannot pay for?

• Evaluations should focus on specific current SNAP-Ed interventions or initiatives. Evaluation of projects or initiatives other than SNAP-Ed interventions or initiatives is considered research and therefore will not be approved for funding. Those interested in broad research may wish to seek alternate sources of funding. For example, requests to fund the creation or validation of an evaluation tool that is not specific to the SNAP-Ed intervention would not be approved. SNAP-Ed also will pay for the data collection from a control group or comparison groups when such data is necessary and justified to conduct an impact evaluation of the SNAP-Ed intervention.

How do you evaluate policy, systems, and environmental changes?

• Evaluating policy, systems, and environmental change starts with identifying the primary changes to be made in an institution or community. Once the goals are in place it is

important to collect baseline data to document the current status of the policies or environments to be changed and the level of community and institutional support for the change. Then, as changes are made those changes can be tracked and recorded over time.

• Logic models can be helpful to make clear the connection between the policy and program changes that are planned and how they relate to the ultimate outcomes of improved nutrition, physical activity, and maintenance of normal body weight. Creating a logic model also helps to identify what to measure as part of the evaluation each step along the path. An excellent resource on how to develop a logic model can be found here:

http://www.wkkf.org/knowledge-center/resources/2006/02/wk-kellogg-foundationlogic-model-development-guide.aspx

 Documenting changes in individual behaviors regarding food or beverage choices or activity levels that will prevent overweight or obesity is valuable. The changes that take place over time can be observed at the individual, environmental, and systems levels. Choosing the right outcome measure at the right level of change is important. There are many choices. An example of some outcome measures is available here: <u>http://snap.nal.usda.gov/snap/WesternRegionEvaluationFramework.pdf</u>

How can you make evaluation work for you?

- Collect practical evaluation data that will help you make timely decisions about your interventions. Select realistic outcomes: don't expect too much and measure at the appropriate point in the logic model.
- Plan and implement the evaluation at the onset or as early in the program as possible and identify a skilled evaluator to assist you.
- Give evaluation the same importance as all other aspects of the program...it will serve you well!

Where can I learn more about effective obesity prevention evaluation?

- <u>NCCOR</u> has created a Measures Registry, a searchable database of diet and physical activity measures relevant to childhood obesity research. It can be found here: <u>http://nccor.org/projects/measures/index.php</u>
- <u>Healthy Eating Research (HER)</u> is a national program of the Robert Wood Johnson Foundation. The program supports research on environmental and policy strategies with strong potential to promote healthy eating among children to prevent childhood obesity, especially among low-income and racial and ethnic populations at highest risk for obesity. You can contact HER at <u>HealthyEating@umn.edu</u> or 800-578-8636.
- <u>Nutrition and Obesity Policy Research and Evaluation Network (NOPREN)</u> is a thematic research network of CDC's Prevention Research Centers Program. Its mission is to conduct transdisciplinary nutrition- and obesity-related policy research and evaluation along a policy change continuum. You can learn more about NOPREN by contacting Angie Cradock, Sc.D., Deputy Director, Harvard Prevention Research Center on Nutrition and Physical Activity at <u>acradock@hsph.harvard.edu</u> or 617-384-8933.

Setting	Strategies and Interventions	
Child Care	 Nutrition Strategies: Develop, implement, and evaluate food and beverage policies for child care settings that meet United States Department of Agriculture (USDA), Centers for Disease Control and Prevention (CDC), Let's Movel Child Care (LMCC), or American Academy of Pediatrics (AAP) standards Encourage child care center and student participation in federal food and nutrition assistance (CACFP, WIC, and SNAP) Support breastfeeding in child care Improve capacity of child care providers and food service staff in nutrition education and healthy meal planning and food preparation Develop, implement, and evaluate child care gardens Start and expand Farm to Child Care programs Promote access to drinking water Support development of wellness councils Establish strong child care wellness and education programs and policies consistent with LMCC Provide parent education through the setting Physical Activity Strategies: Develop, implement, and evaluate chive transport programs Establish strong child care wellness educational programs and policies consistent with LMCC turber of AP standards Limit screen time Develop, implement, and evaluate active transport programs Establish strong child care wellness educational programs and policies consistent with LMCC Improve capacity of child care wellness educational programs Establish strong child care wellness educational programs Establish strong child care wellness councils Establish strong child care wellness councils play when possible Support development of child care wellness councils Provide parent education through the child care setting 	

Setting	Strategies and Interventions	
	EXAMPLES	SOURCE (SENT BY)
		LINK
	<i>Let's Move! Child Care Initiative</i> Initiative designed to assist child care providers in implementing the five key physical activity and nutrition goals.	Let's Move! Child Care http://healthykidshealthyfuture.org/welcome.html
	<i>Color Me Healthy</i> Program designed to improve fruit and vegetable intake and increase physical activity among children ages 4-5 years in child care and preschool settings.	Center for Training and Research Translation (CenterTRT), CDC Review of Population-Level Interventions for Child Obesity Prevention http://centertrt.org/?p=intervention&id=1095
Child Care	<i>Eat Well Play Hard in Child Care Settings</i> Multi-component intervention that focuses on improving the nutrition and physical activity behaviors of pre-school age children and their parents/caregivers and influencing food and activity practices in child care settings.	Wave 1 SNAP-Ed Evaluation, Center TRT, CDC Review of Population-Level Interventions for Child Obesity Prevention <u>http://centertrt.org/?p=intervention&id=1105</u>
	Healthy Habits for Life (Sesame Street) (In English and Spanish) Created to help parents and caregivers encourage children to build healthy habits early. The project features Sesame Street friends who model fun ways to move and play and encourage children to explore and enjoy healthy foods	Sesame Street <u>http://www.sesamestreet.org/parents/topicsandactivities/toolkits/healthyhabits</u>
	Ready, Set, Go! Creating and Maintaining a Wellness Environment in Child Care Centers Participating in the CACFP	National Food Service Management Institute
	National Food Service Management Institute best practice resource for developing and maintaining a wellness environment.	http://www.nfsmi.org/documentlibraryfiles/PDF/201 10126034352.pdf

Setting	Strategies and Interventions	
	<i>Hip Hop to Health Jr.</i> Evidence-based healthy eating and exercise curriculum developed for children ages 3-5 years.	CDC Review of Population-Level Interventions for Child Obesity Prevention http://www.hiphoptohealth.com/blog/
	<i>I am Moving, I am Learning: A Proactive Approach for</i> <i>Addressing Child Obesity in Head Start</i> Program designed to increase daily moderate-to- vigorous physical activity (MVPA), improve the quality of movement activities, and promote healthy food choices among preschool children.	http://www.mphoptonearth.com/blog/ Head Start http://eclkc.ohs.acf.hhs.gov/hslc/tta- system/health/Health/nutrition/nutrition%20progra m%20staff/iammovingiam.htm
Child Care	Nutrition and Physical Activity Self-Assessment for Child Care (NAP SACC) Self-assessment, goal setting, and action planning tools combined with workshops and technical assistance tools. Designed to be used together to enhance policies, practices, and environments in child care. Self-assessment and goal setting tools can be used in combination with other interventions designed to improve child care policies and practices in nutrition and physical activity.	Center TRT, CDC Review of Population-Level Interventions for Child Obesity Prevention
	<i>First Years in the First State: Improving Nutrition & Physical Activity Quality in Delaware Child Care</i> Delaware Department of Education Child and Adult Care Food Program (one version for partnering with families, one for child care administrators, and one for menu planning).	Delaware Department of Education/USDA Team Nutrition <u>http://healthymeals.nal.usda.gov/hsmrs/Delaware/</u> <u>nhpsadminguide.pdf</u> <u>http://www.doe.k12.de.us/infosuites/students_famil</u> <u>y/nutrition/cacfp/PARTNERINGwFAMILIES_083011.</u> <u>pdf</u> <u>http://healthymeals.nal.usda.gov/hsmrs/Delaware/</u> <u>nhpsmenuplanning.pdf</u>

Caring for our Children: Our Child Care Center Supports Breastfeeding: <u>http://nrckids.org/CFOC3/PDFVersion/PDF_Color/CFOC3_JJ.pdf</u>

Let's Move! Child Care/Nemours Website: http://healthykidshealthyfuture.org/welcome.html

Nutrition and Wellness Tips for Young Children, Child Nutrition Division, Food and Nutrition Service, USDA: <u>http://www.teamnutrition.usda.gov/Resources/nutritionandwellness.html</u>

Preventing Child Obesity in Early Care and Education Programs, National Resource Center for Health and Safety in Child Care: <u>http://nrckids.org/index.cfm/products/preventing-childhood-obesity-in-early-care-and-education/</u>

Head Start Body Start: National Center for Physical Development and Outdoor Play: http://www.aahperd.org/headstartbodystart/

State Efforts to Address Child Obesity Prevention in Child Care Quality Rating and Improvement Systems: <u>http://www.altarum.org/files/imce/QRIS_Report_Jan_2012%20.pdf</u>

Sesame Street Healthy Habits for Life Resource Kit: http://kidshealth.org/classroom/index.jsp?Grade=cc&Section=hhfl

Sesame Street Healthy Habits for Life – we have the moves!: <u>http://www.sesamestreet.org/cms_services/services?action=download&uid=46841dfe-a76c-4df7-8e40-d165417d9be5</u>

Yale Rudd Center's Wellness Child Care Assessment Tool (WellCCAT): <u>http://www.yaleruddcenter.org/resources/upload/docs/what/communities/WellnessChildCareAssessmentToolForResearch.pdf</u>

USDA/Farm to Child Care: http://www.fns.usda.gov/cnd/f2s/farm_to_childcare.htm

USDA/Team Nutrition: http://teamnutrition.usda.gov/childcare.html

Setting	Strategies and Interventions	
School	Nutrition Strategies: • Develop, implement, and evaluate school gardens • Encourage integration of garden food into food service operations • Promote intersections between garden and classroom curriculum • Start and expand Farm to School programs • Increase purchases and use of foods from local farms • Improve student, teacher, and staff access to nutrition information through menu labeling and classroom curriculum to improve student understanding of nutrition information • Develop, implement, and evaluate cafeteria point of purchase prompts • Support development of school health councils including student members • Encourage school and student participation in federal food and nutrition assistance (NSLP and SFSP Summer Seamless) • Provide technical assistance for application process • Limit student participant bias	
	EXAMPLES: SOURCE (SENT BY)/LINK:	
	<i>Bienestar</i> Culturally tailored school-based diabetes mellitus prevention program for low-income Mexican American children.	CDC Review of Population-Level Interventions for Child Obesity Prevention, NIH <u>http://rtips.cancer.gov/rtips/programDetails.do?prog</u> <u>ramId=247904</u>

<i>Coordinated Approach to Child Health (CATCH)</i> Large school-based field trial aimed at improving school food service, nutrition, and physical education.	CDC Review of Population-Level Interventions for Child Obesity Prevention <u>http://www.sph.uth.tmc.edu/catch/</u>
<i>Eat Well & Keep Moving</i> Complete curriculum that helps academic, physical education, and health education teachers guide upper elementary school students to make healthier choices while building skills.	CDC Review of Population-Level Interventions for Child Obesity Prevention <u>http://www.eatwellandkeepmoving.org/</u>
<i>Kids Cook</i> Program encouraging children and families to adopt healthier behaviors through hands-on preparation of a variety of nutrient-rich foods paired with daily physical activity.	ASNNA http://www.kidscook.us/
<i>Media-Smart Youth</i> An interactive after-school education program for young people ages 11 to 13. It is designed to help teach them about the complex media world around them, and how it can affect their healthespecially in the areas of nutrition and physical activity.	NICHD/NIH http://www.nichd.nih.gov/msy/Pages/index.aspx
<i>Pick a better snack™ & Act</i> Program combining direct, school-based nutrition education and community-based social marketing efforts to help low-income lowans make decisions consistent with the Dietary Guidelines for Americans and MyPlate.	Iowa Nutrition Network <u>http://www.idph.state.ia.us/INN/PickABetterSnackspx</u>
<i>Riverside Unified School District Farmer's Market Salad</i> <i>Bar Program</i> Program designed to promote healthy eating in children by increasing the availability of fruits and vegetables in school lunches and providing nutrition education.	CDC, Center TRT http://centertrt.org/?p=intervention&id=1101
<i>Smarter Lunchrooms Movement</i> Initiative designed to equip school lunchrooms with evidence-based tools that improve child eating behaviors	Smarter Lunchrooms http://smarterlunchrooms.org/

School

	and improve the health of children.	
	<i>School Nutrition Policy Initiative</i> School policies developed for Philadelphia schools that aim to help children adopt long-term healthy eating habits.	CDC, Philadelphia Department of Public Health http://thefoodtrust.org/what-we-do/schools/nutrition-education
School	NOTE: To be SNAP-Ed appropriate, the following physical act component.	ivity interventions must include a nutrition education
	<i>Lifestyle Education for Activity Program (LEAP)</i> Program designed to change both instructional practices and the school environment to increase support for physical activity among girls.	CDC Review of Population-Level Interventions for Child Obesity Prevention <u>http://www.sph.sc.edu/usc_cparg/leap/LEAP_administ</u> <u>rative_document.pdf</u> <u>http://www.sciencedirect.com/science/article/pii/S</u> 0149718906000826
	<i>Sports Play Active Recreation for Kids (SPARK)</i> Intervention that uses physical education specialists to implement instructional strategies to increase the amount of time students spend in moderate-to-vigorous physical activity in physical education.	CDC Review of Population-Level Interventions for Child Obesity Prevention <u>http://www.sparkpe.org/</u>
	<i>Take 10!</i> Program designed to help children understand the importance of fun physical activity and other healthful behaviors, including nutrition.	CDC Review of Population-Level Interventions for Child Obesity Prevention <u>http://www.take10.net/</u>

National Food Service Management Institute: <u>http://www.nfsmi.org/</u>

Farm to School program: <u>http://www.farmtoschool.org/</u>

Let's Move: http://www.letsmove.gov/healthy-schools

- Salad Bars to Schools: <u>http://saladbars2schools.org/</u>
- Chefs Move to Schools: <u>http://www.chefsmovetoschools.org/</u>
- Healthier US School Challenge: <u>http://www.fns.usda.gov/tn/healthierus/index.html</u>

USDA Farm to School: http://www.fns.usda.gov/cnd/f2s/Default.htm

USDA/Team Nutrition: <u>http://teamnutrition.usda.gov/educators.html</u>

Setting	Strategies and Interventions	
Communities	 Nutrition Strategies: Promote community gardens Develop, implement, and evaluate healthy eating and active living standards for community venues Encourage compliance with federal menu labeling regulations Increase availability of healthy food retail, including mobile vendors, farmers' markets, corner/country stores, and grocery stores Promote availability of healthy restaurants and food vendors Encourage drinking water access Encourage participation in federal food and nutrition assistance programs Provide education and collaborate with key community outlets and stakeholders Encourage point-of-purchase prompts for healthy foods and beverages at area food retail outlets and food service institutions (e.g., schools, municipal buildings, worksites) Physical Activity Strategies: Build capacity to implement active living policy at the community level and by community organizations Engage local businesses, government, civic organizations, community groups, and citizens in active living Develop, implement, evaluate, and disseminate individually adapted health behavior change programs Use point-of-decision prompts to encourage use of stairs Use social support interventions in community settings 	
	EXAMPLES	SOURCE (SENT BY)/LINK
	<i>Mind, Exercise, NutritionDo It! (MEND)</i> Comprehensive, family-based program that helps overweight children ages 7-13 years improve their health, fitness, and self-esteem.	CDC Review of Population-Level Interventions for Child Obesity Prevention http://www.mendfoundation.org/
	Ways to Enhance Children's Activity and Nutrition (WeCan!) Initiative designed to give parents, caregivers, and entire communities a way to help children ages 8-13 years stay at a healthy weight.	NHLBI, CDC Review of Population-Level Interventions for Child Obesity Prevention <u>http://www.nhlbi.nih.gov/health/public/heart/obesit</u> <u>y/wecan/</u>

	NOTE: To be SNAP-Ed appropriate, the following interventions must be modified to align with SNAP-Ed policies as noted. You are encouraged to work with your SNAP-Ed Regional Coordinator.	
	Baltimore Healthy Stores Program that uses a store's existing facilities to improve access to healthy food and to increase consumers' knowledge, self-efficacy, and behavioral intentions about healthy food choices and food preparation.	Center TRT http://centertrt.org/?p=intervention&id=1093
Communities	<i>Communities of Excellence in Nutrition, Physical Activity</i> <i>and Obesity Prevention (CX3)</i> Powerful tool that captures and communicates neighborhood-level data to promote healthier communities. NOTE: May be SNAP-Ed appropriate in collaboration with other partners.	ASNNA http://www.cdph.ca.gov/programs/cpns/Pages/CX3 Main_Navgation.aspx
	<i>Health Bucks</i> Program designed to increase consumption of fruits and vegetables among the intended low-income population by using coupons at farmers' markets. NOTE: SNAP-Ed cannot fund the incentive	Center TRT, CDC Review of Population-Level Interventions for Child Obesity Prevention <u>http://centertrt.org/?p=intervention&id=1109</u>

Let's Move: <u>http://www.letsmove.gov/healthy-communities</u>

• Cities, Towns, & Counties: <u>http://www.letsmove.gov/become-lets-move-city-or-town</u>

The National Gardening Association, Kids Gardening Program: <u>http://www.kidsgardening.org/</u>

Safe Routes to School: <u>http://www.saferoutesinfo.org/</u>

The Nutrition Environment Measurement Survey: <u>http://www.med.upenn.edu/nems/</u>

California Dept of Public Health, SNAP-Ed Worksite Program: <u>http://www.takeactionca.cdph.ca.gov/california-fit-business-kit-tools.asp</u>

Setting	Strategies and Interventions	
Helping Families	 Nutrition Strategies: Promote participation in federal food and nutrition assistance programs (CACFP, WIC, and SNAP) Encourage use of farmers' market with SNAP and WIC access at key community outlets Encourage participation in community and home gardens Develop and disseminate family-friendly educational materials that encourage family meals and kids' cooking Encourage the development and adoption of healthy eating food and beverage household policies and child-feeding practices Support family-friendly cooking demonstrations and taste testings throughout the community Physical Activity Strategies: Support family-friendly physical activity opportunities throughout the year, throughout the community Promote participation in and use of area physical activity resources, including partnerships with parks and trails organizations Encourage the development and adoption of active living household policies Encourage availability and access to area fun runs and walks 	
	EXAMPLES:	SOURCE (SENT BY)/LINK
Prog know	<i>Cooking Matters</i> Program that empowers families with the skills, knowledge, and confidence to prepare healthy and affordable meals.	ASNNA, Share Our Strength <u>http://cookingmatters.org/</u>
	Cooking Matters at the Store	Share Our Strength
	Program aimed to help families make healthy and affordable choices at the supermarket.	http://www.cookingmattersatthestore.org
	<i>Eat Better, Eat Together</i> Resources that provide helpful tips for families on eating together and meal planning.	CDC Review of Population-Level Interventions for Child Obesity Prevention
		http://nutrition.wsu.edu/ETEB/

Setting	Strategies and Interventions	
	<i>Faithful Families Eating Smart and Moving More</i> Practice-tested intervention that educates faith community members about food, physical activity, and becoming advocates for healthy policy and environmental changes within their communities.	Center TRT http://centertrt.org/?p=intervention&id=1090
Helping Families	 Obesity Prevention Plus Parenting Support Home-visiting program to provide American Indian mothers with preschool-age children (ages 9 months to 3 years) with support in making changes in lifestyle behaviors, including nutrition, physical activity, and parenting. NOTE: Portions of this might be SNAP-Ed appropriate. Could be done in collaboration with others. Parenting not SNAP-Ed allowable. Costs of home visits may be prohibitive. 	CDC Review of Population-Level Interventions for Child Obesity Prevention <u>http://www.ncbi.nlm.nih.gov/pubmed/12740449</u>

Let's Move: <u>http://www.letsmove.gov/healthy-families</u>

USDA/Team Nutrition: <u>http://teamnutrition.usda.gov/parents.html</u>

Rethink Your Drink PowerPlayCampaign.aspx Rethink Your Drink ASNNA Educational campaign focusing on the contribution of sweetened beverages to increasing rates of overweight and obesity. ASNNA http://www.cdph.ca.gov/programs/cpns/Pages/RethinkYour http://www.cdph.ca.gov/programs/cpns/Pages/RethinkYour	Setting	Strategies and Interventions	
 Increase parental and influencer support through family education/behavior change programs Work with media sponsorships Support social marketing campaigns using existing materials from CDC's Community Health Media Center EXAMPLES Champions for Change (CA) Program aimed at helping families make healthy changes in their kitchens, homes, schools, and neighborhoods. Children's Power Play Initiative (CA) Initiative to motivate and empower California children ages 9-11 years to eat 3 to 5 cups of fruits and vegetables and get at least 60 minutes of physical activity every day. Rethink Your Drink Educational campaign focusing on the contribution of sweetened beverages to increasing rates of overweight and obesity. ASNNA 	Marketing/	 Increase parental and influencer support through family education/behavior change programs Limit advertisements of less healthy foods and beverages Work with media sponsorships 	
Social Marketing/ Media Champions for Change (CA) Program aimed at helping families make healthy changes in their kitchens, homes, schools, and neighborhoods. ASNNA http://www.cachampionsforchange.cdph.ca.gov/en/ index.php http://www.cachampionsforchange.cdph.ca.gov/en/ index.php Children's Power Play Initiative (CA) Initiative to motivate and empower California children ages 9-11 years to eat 3 to 5 cups of fruits and vegetables and get at least 60 minutes of physical activity every day. ASNNA Rethink Your Drink Educational campaign focusing on the contribution of sweetened beverages to increasing rates of overweight and obesity. ASNNA		 Increase parental and influencer support through family education/behavior change programs Work with media sponsorships 	
Marketing/ Media Program aimed at helping families make healthy changes in their kitchens, homes, schools, and neighborhoods. http://www.cachampionsforchange.cdph.ca.gov/en/ index.php Children's Power Play Initiative (CA) ASNNA Initiative to motivate and empower California children ages 9-11 years to eat 3 to 5 cups of fruits and vegetables and get at least 60 minutes of physical activity every day. ASNNA Rethink Your Drink Educational campaign focusing on the contribution of sweetened beverages to increasing rates of overweight and obesity. ASNNA		EXAMPLES	SOURCE (SENT BY)/LINK
Initiative to motivate and empower California children ages 9-11 years to eat 3 to 5 cups of fruits and vegetables and get at least 60 minutes of physical activity every day.http://www.cdph.ca.gov/programs/cpns/Pages/Childrens PowerPlayCampaign.aspxRethink Your Drink Educational campaign focusing on the contribution of sweetened beverages to increasing rates of overweight and obesity.ASNNAhttp://www.cdph.ca.gov/programs/cpns/Pages/RethinkYour		Program aimed at helping families make healthy changes	http://www.cachampionsforchange.cdph.ca.gov/en/
Educational campaign focusing on the contribution of sweetened beverages to increasing rates of overweight and obesity. <u>http://www.cdph.ca.gov/programs/cpns/Pages/RethinkYour</u>		Initiative to motivate and empower California children ages 9-11 years to eat 3 to 5 cups of fruits and vegetables	http://www.cdph.ca.gov/programs/cpns/Pages/Childrens
NOTE: May be SNAP-Ed appropriate if brands of foods,		Educational campaign focusing on the contribution of sweetened beverages to increasing rates of overweight and obesity.	ASNNA http://www.cdph.ca.gov/programs/cpns/Pages/RethinkYour Drink.aspx

Screen Free Week: http://www.commercialfreechildhood.org/screenfreeweek

Media Center from CDC's Division of Community Health: <u>http://apps.nccd.cdc.gov/chmc/Apps/overview.aspx</u>

This center includes a collection of audience-tested advertising and support materials produced by state and local health departments, nonprofit organizations, and federal agencies. These materials are designed to create awareness about obesity and other chronic conditions and to promote healthy living. Search the collection and choose ads that are appropriate to your efforts.