

California SNAP-Ed Annual Report

Federal Fiscal Year 2022





Table of Contents

Executive Summary..... 1

Program Overview..... 2

California SNAP-Shot: Direct Education..... 14

California SNAP-Shot: Policy, Systems,
and Environmental Change 32

California Snap-Shot: Success Stories..... 41

Conclusion..... 48

References 49

Appendices 50



Executive Summary

CalFresh Healthy Living, California's Supplemental Nutrition Assistance Program – Education, supports eligible Californians in achieving healthy behaviors through nutrition and physical activity education, community changes, and social marketing. The California Department of Social Services oversees four State Implementing Agencies: CalFresh Healthy Living; University of California; California Department of Aging; California Department of Public Health; and Catholic Charities of California, Inc. The State Implementing Agencies work through a network of Local Implementing Agencies and community partnerships to reach diverse CalFresh Healthy Living-eligible populations.

Statewide Results

In Federal Fiscal Year 2022, CalFresh Healthy Living promoted healthy eating and active living across the lifespan for over 2 million eligible Californians through both in-person and virtual programming in 53 out of California's 58 counties. CalFresh Healthy Living collaborated with local partners on Policy, Systems, and Environmental change interventions, reaching an estimated 1,867,130 Californians across 1,357 sites. A total of 201,088 Californians participated in nutrition and physical activity classes across 1,857 sites, and surveyed participants reported significant improvements in healthy eating, food resource management, and physical activity behaviors.



CalFresh Healthy Living programming includes Direct Education, interactive classes that engage participants in learning about nutrition and physical activity, as well as Policy, Systems, and Environmental Change interventions that increase access to healthy food, promote healthy dietary choices, and expand opportunities for physical activity.



Program Overview

Who We Are

CalFresh Healthy Living, California's Supplemental Nutrition Assistance Program–Education (SNAP-Ed) program, works toward a California where everyone is healthy, active, and nourished. CalFresh Healthy Living serves Californians with low resources by promoting and supporting healthy living through good nutrition and increased physical activity. The program reaches eligible Californians through individual, organizational, and community-focused evidence-based interventions.

The California Department of Social Services (CDSS) oversees the CalFresh Healthy Living program and collaborates with four State Implementing Agencies (SIAs): CalFresh Healthy Living; University of California; California Department of Aging; California Department of Public Health; and Catholic Charities of California, Inc. The SIAs contract with 102 Local Implementing Agencies (LIAs) to deliver evidence-based Direct Education classes in combination with Policy, Systems, and Environmental (PSE) change interventions. In addition, CalFresh Healthy Living collaborates with contractual partners on innovative pilot projects and social marketing services.

SIAs and LIAs use existing partnerships to deliver program services through Local Health Departments, University of California Cooperative Extension county offices, local Catholic Charities Organizations, Area Agencies on Aging, Leah's Pantry, and other organizations to reach CalFresh Healthy Living-eligible Californians where they work, learn, live, shop, eat, and play. Figure 1.1 shows the CalFresh Healthy Living program structure.



Figure 1.1 California's CalFresh Healthy Living Federal Fiscal Year (FFY) 2022 Program Structure.

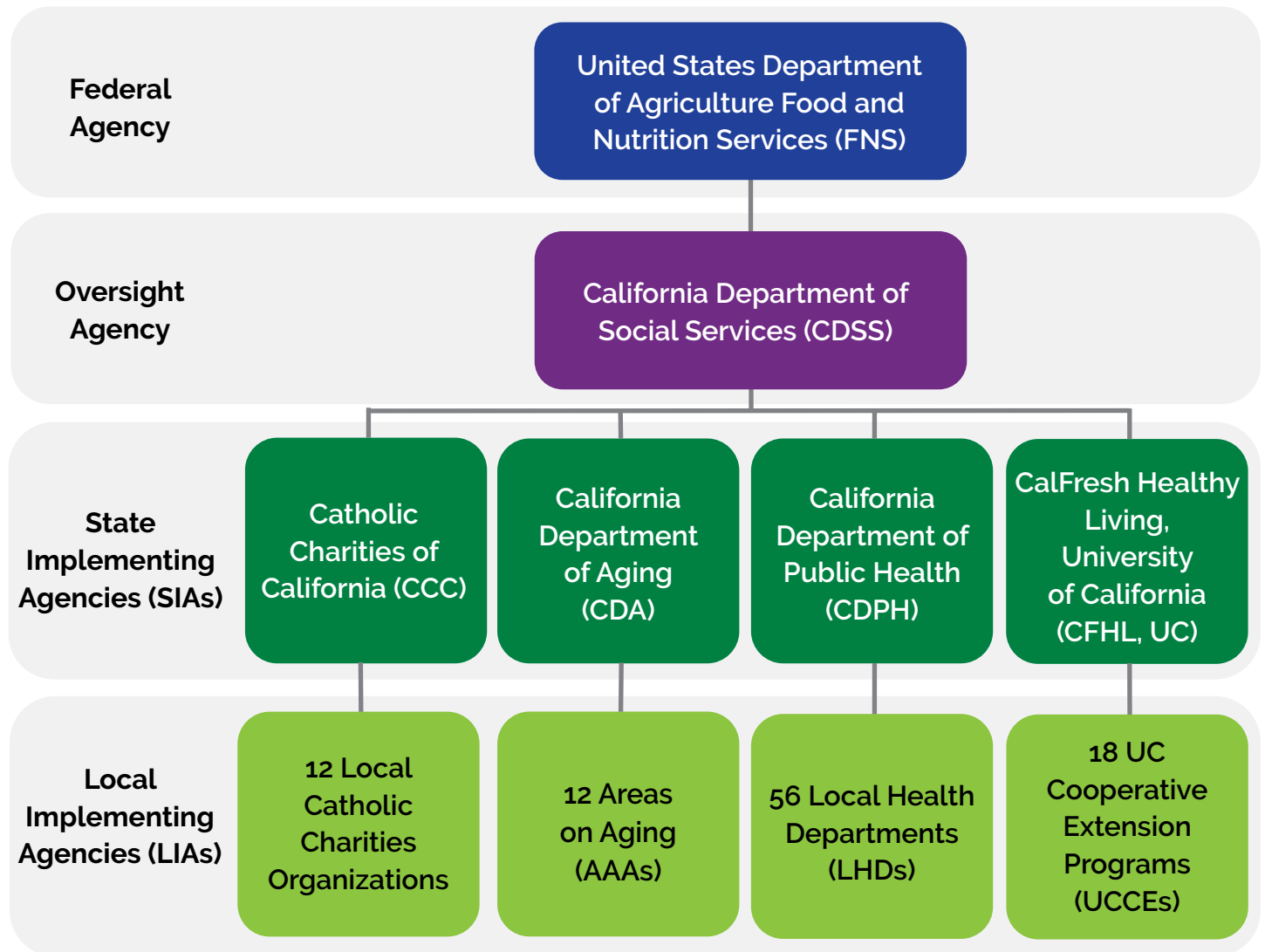


Figure 1.1 California's CalFresh Healthy Living FFY 2022 Program Structure.

California Department of Social Services

State Implementing Agencies (SIAs) and their Local Implementing Agencies (LIAs):

Catholic Charities of California, Inc. (CCC)

- 12 Local Catholic Charities Organizations

California Department of Aging (CDA)

- 16 Area Agencies on Aging (AAAs)

California Department of Public Health (CDPH)

- 56 Local Health Departments (LHDs)

CalFresh Healthy Living, University of California (CFHL, UC)

- 18 UC Cooperative Extension programs (UCCEs)

CalFresh Healthy Living Principles and Priorities

In FFY 2022, CalFresh Healthy Living established organizational CalFresh Healthy Living Principles and Priorities. The following principles are the fundamental truths that serve as the foundation for the CalFresh Healthy Living priorities:

1. All people have the right to the resources necessary for optimal health.
2. Longstanding racial and social inequities are persistent due to intentional systems designed to benefit some at the detriment of others.
3. People and their communities are interdependent: our communities should be places that promote health and well-being for all.
4. Lived experience is powerful and important: each person should have the opportunity to contribute to the ideas and actions that shape their communities.

CalFresh Healthy Living has identified the following priorities as the most important work given current conditions and climate:

1. Address racial and health equity through the promotion and maintenance of an equitable program practice that is inclusive of those with lived experience in design, implementation, and evaluation.
2. Collaborate and work with partners across the Socio-Ecological Model to implement multi-level and multi-component evidence-based programs to maximize reach, effectiveness, and impact.



3. Focus on Nutrition Security by working through education and community efforts towards a state where all people, at all times, have physical, social, and economic access to sufficient, safe, and nutritious food that meets their dietary needs and food preferences for an active and healthy life that promotes well-being and prevents disease.
4. Focus on Active Living opportunities across the spectrum of physical activity education and promotion, policies and environmental change for an active and healthy life.

Goals and Objectives

CalFresh Healthy Living served 201,088 eligible Californians with Direct Education classes in FFY 2022. The program also developed and supported 5,333 nutrition and physical activity PSE changes throughout the state. (Table 1.1).

Table 1.1 California CalFresh Healthy Living Goals and Objectives for FFYs 2020 – 2023.

Goal 1: Empower low-income Californians toward healthful dietary choices and promote the growth of California agriculture.

Objective Number	Objective Description	FFY 2022 Results
Objective 1a	Begin and maintain community changes to support healthy eating in 15% of new and continuing approved sites.	In FFY 2022, 14% of approved sites began and/or maintained community changes to support healthy eating.
Objective 1b	Implement new changes to support healthy eating at continuing sites; 30% of previously engaged sites will demonstrate at least one additional change to support healthy eating.	In FFY 2022, 32% of previously engaged sites reported at least one additional change to support healthy eating.
Objective 1c	80% of sites that have made changes to support healthy eating will have a sustainability plan.	In FFY 2022, 69% of sites that have made changes to support healthy eating report having a sustainability plan.

Objective Number	Objective Description	FFY 2022 Results
Objective 2	<p>Demonstrate significant improvements in one or more of the following healthy eating behaviors for 70% of the program activities evaluated:</p> <ul style="list-style-type: none"> • Eating more than one kind of fruit • Eating more than one kind of vegetable • Drinking water • Drinking fewer sugar-sweetened beverages • Cups of fruit consumed per day • Cups of vegetables consumed per day 	<p>In FFY 2022, of the primary curricula that covered healthy eating, 56% showed significant improvements in at least one of the healthy eating behaviors.</p>
Objective 3	<p>Maintain or improve diet quality at the population level.</p>	<p>Unable to report for FFY 2022 due to contract delays.</p>
Objective 4	<p>Demonstrate significant improvements in one or more of the following behaviors among 70% of the program activities evaluated:</p> <ul style="list-style-type: none"> • Reading nutrition facts labels or nutrition ingredients lists • Having food throughout the month • Comparing prices before buying foods • Shopping with a list 	<p>In FFY 2022, of the primary curricula that covered Food Resource Management Behaviors, 88% showed significant improvements in at least one of the listed behaviors.</p>

Goal 2: Promote physically active lifestyles for low-income Californians.

Objective Number	Objective Description	FFY 2022 Results
Objective 1a	Begin and maintain community changes to promote physical activity in 15% of new and continuing approved sites.	In FFY 2022, 8% of approved sites began and/or maintained community changes to promote physical activity.
Objective 1b	Implement new changes to promote physical activity at continuing sites; 30% of previously engaged sites will demonstrate at least one additional change.	In FFY 2022, 11% of previously engaged sites reported at least one additional change to promote physical activity.
Objective 1c	80% of sites that have made changes to promote physical activity will have a sustainability plan.	In FFY 2022, 61% of sites that have made changes to promote physical activity reported having a sustainability plan.
Objective 2	Demonstrate significant improvements in one or more of the following physical activity behaviors for 70% of the program activities evaluated: <ul style="list-style-type: none"> • Increased physical activity and leisure sport • Increased moderate or vigorous physical activity 	CalFresh Healthy Living is making improvements that will allow reporting in the FFY 2024 – 2026 cycle.
Objective 3	Maintain or improve physical activity at the population level	Unable to report for FFY 2022 due to contract delays.

California's targets are set to be achieved by the end of the three-year funding cycle. While the COVID-19 pandemic continued to impact service delivery, CalFresh Healthy Living progressed toward its targets for all objectives measured in FFY 2022 compared to FFY 2021. These objectives

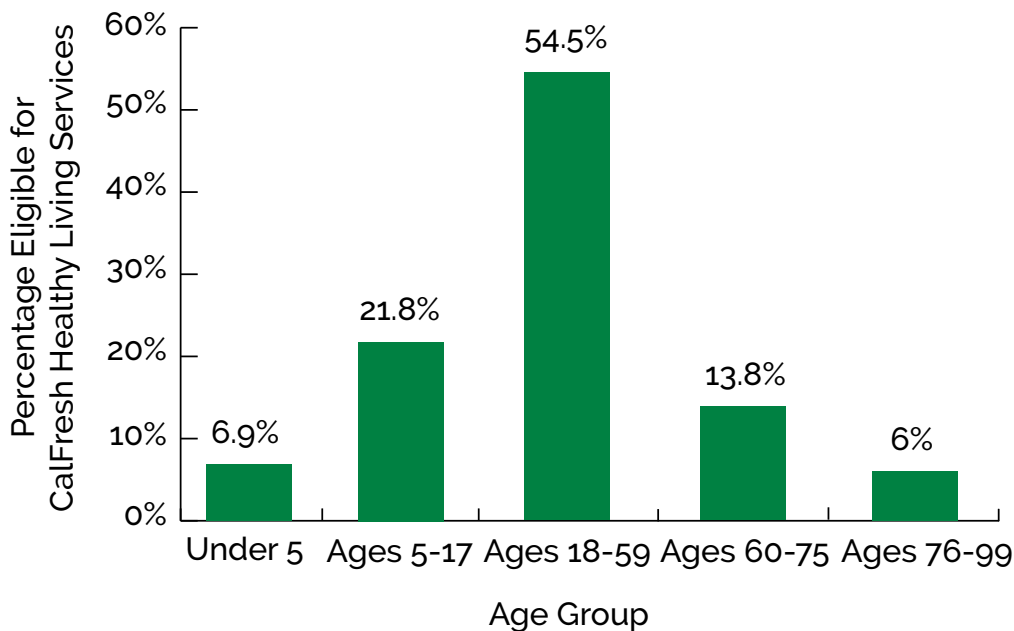
will continue to be measured in FFY 2023, the final year before a new funding cycle begins. Detailed results for Goals 1 and 2 and Objective 1 can be found in the [California SNAP-Shot: Policy, Systems, and Environmental Change](#) section of this report. Results for Goals 1 and 2, Objectives 2 and 4 are reported in the [California SNAP-shot: Direct Education](#) section of this report.

Who We Serve

The CalFresh Healthy Living program serves Californians of all ages who live in households with incomes at or below 185% of the Federal Poverty Level, including those who qualify for CalFresh, known nationally as the State Nutrition Assistance Program. About one-third of Californians are eligible for CalFresh Healthy Living services. This represents more than 10.7 million adults, adolescents, and children throughout the state (UCLA Center for Health Policy Research, 2021).

According to 2021 data from the U.S. Census Bureau's American Community Survey (U.S. Census Bureau, 2021), the largest proportion of individuals eligible for CalFresh Healthy Living are adults aged 18-59 (54.5%), followed by children aged 5-17 (21.8%), (Figure 1.2).

Figure 1.2 Proportions of Californians Eligible for CalFresh Healthy Living by Age (2021).



According to 2021 data from the U.S. Census Bureau's American Community Survey (U.S. Census Bureau, 2021), just over half of Californians eligible for CalFresh Healthy Living are Hispanic or Latino (54%). About half of eligible Californians are White (49.6%), 13.2% are Asian, 8.9% are Black or African American, 3.6% are American Indian or Alaska Native, and 0.9% are Native Hawaiian or other Pacific Islander (Figure 1.3). Nearly half of eligible Californians (45.6%) selected "some other race."

Figure 1.3 Percentage of Californians Eligible for CalFresh Healthy Living by Ethnicity and Race (2021).

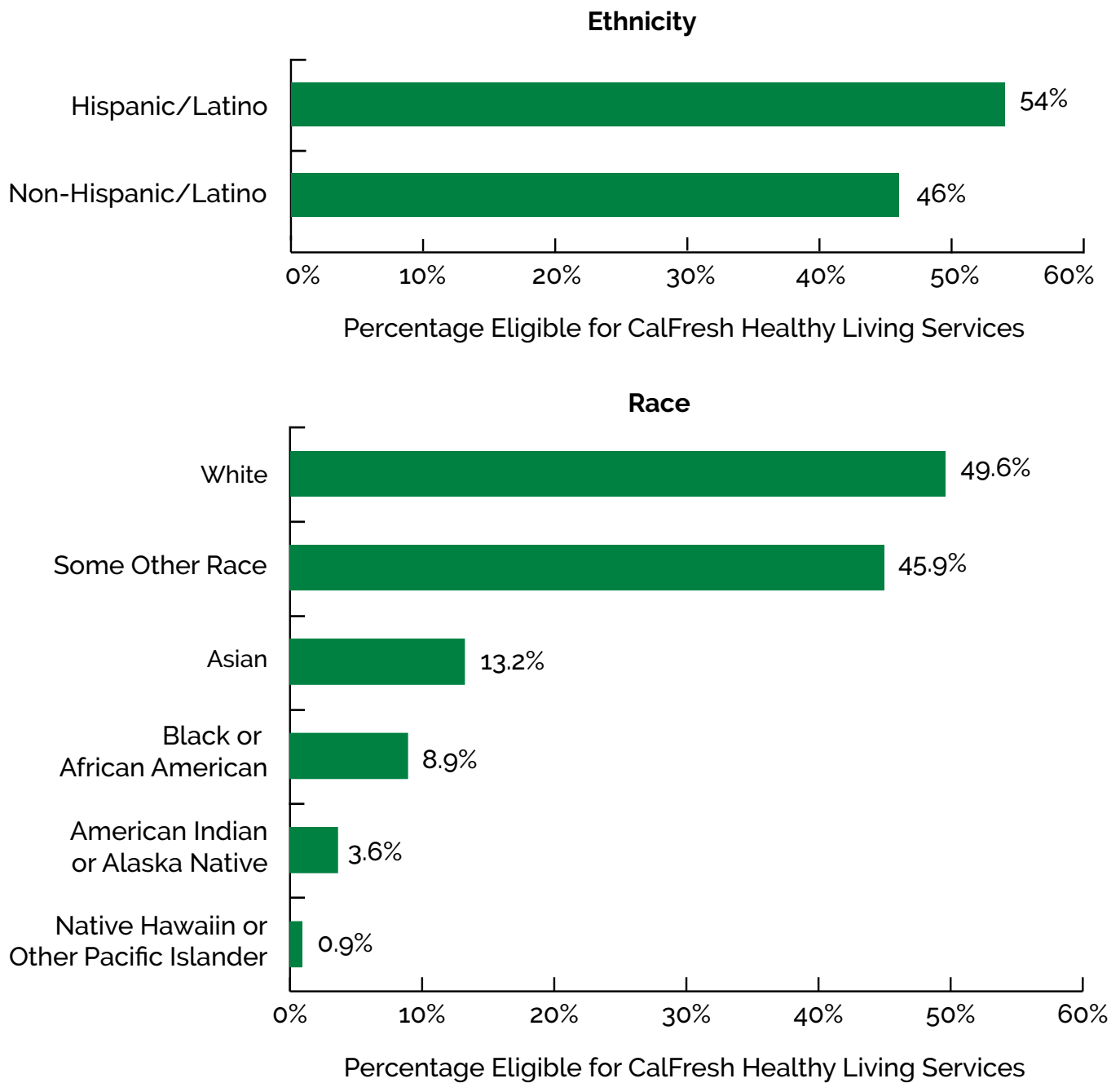


Figure 1.3 Note: Respondents could select more than one race; therefore, numbers do not add to 100%. Data from the American Community Survey (United States Census Bureau, 2021).

The California Family Health Study, a representative telephone survey of CalFresh-eligible Californians, has shown disparities in access to healthy food and dietary behaviors between African Americans and other racial and ethnic groups (Molitor & Doerr, 2021). Surveyed African American mothers reported significantly lower access to healthy food, including fresh fruits and vegetables, in their neighborhoods compared to White and Latina mothers. African American mothers, teens, and children reported higher intakes of added sugar and sugar-sweetened beverages than Whites and Latinos. African American mothers and children also had higher rates of obesity than White and Latino mothers and children. These results show the need for comprehensive CalFresh Healthy Living interventions that address racial disparities.

What We Do

Direct Education and PSEs

CalFresh Healthy Living implements community-based PSE changes through organizational partnerships. PSEs contribute to the health of communities by changing policies, systems, and environments to increase both access to and the appeal of healthy foods as well as opportunities for physical activity. PSEs are implemented in a variety of sites, such as schools, early care, and education centers, food assistance sites, before and after-school programs, and retail food stores. FFY 2022 evaluation results of California's PSE programming are in the [California SNAP-Shot: Policy, Systems, and Environmental Change](#) of this report.



CalFresh Healthy Living delivers evidence-based, behavior-focused nutrition education and physical activity interventions, known as Direct Education, that allow for active engagement in-person or through interactive media. Direct Education uses evidence-based curricula consistent with the *Dietary Guidelines for Americans* (U.S. Department of Health and Human Services and U.S. Department of Agriculture, 2020) and *Physical Activity Guidelines for Americans* (2018 Physical Activity Guidelines Advisory Committee, 2018) and, like PSEs, is delivered at a variety of sites. FFY 2022 evaluation results of California's Direct Education programming are in the [California SNAP-Shot: Direct Education](#) section of this report.

Social Marketing

In FFY 2022, the Healthy Victories campaign, led by the California Department of Public Health, increased awareness of the CalFresh Healthy Living brand, while educating Californians about available resources to encourage small changes that lead to huge victories in overall health. Through targeted paid media and statewide events, Healthy Victories reached Californians through television, radio, social media, digital media, and out-of-home channels (e.g., billboards). The social marketing evaluation is conducted every other year and will be conducted again in FFY 2023. Evaluation results from FFY 2021 indicated that the Healthy Victories campaign successfully reached approximately 83% of surveyed households and demonstrated that the Healthy Victories campaign is positively associated with participants' water, fruit, and vegetable attitudes and consumption.



Social media post shared by CalFresh Healthy Living's Instagram account.

Pilots

CalFresh Healthy Living on College Campuses Project

Beginning in FFY 2020 and continuing into FFY 2022, nine California State University campuses piloted the CalFresh Healthy Living on College Campuses Project through the Center for Healthy Communities at California State University, Chico. To date, the nine campuses have collectively conducted 304 classes reaching 4,495 students. The campuses also reached an estimated 295,055 participants through 27 Healthy Snack Day promotions, 165 Harvest of the Month activities, 18 Rethink Your Drink promotions, and 210 promotional activities. The College Campuses Project has also encouraged healthier campus environments by implementing PSEs in areas identified by campus needs assessments. In FFY 2023, three new campuses will be added to the project, and Leah's Pantry curriculum will be modified for the university student population.

Leah's Pantry CalFresh Healthy Living Podcast

The upcoming CalFresh Healthy Living podcast, *Stocking the Pantry*, is a space for CalFresh Healthy Living providers and their communities to share success stories and strategies for equity-centered and resilience-building initiatives. This opportunity encourages peer-to-peer learning and the amplification of diverse voices in an accessible and engaging format. Each episode will provide a fresh perspective on topics such as nutrition security, education, PSE interventions, and cross-sector collaboration. This digital partnership between CalFresh Healthy Living and Leah's Pantry is expected to launch in the second quarter of FFY 2023.

Community-Based Organization Pilot Projects

CDSS partnered with Public Health Institute Center for Wellness and Nutrition on three pilot projects in FFY 2022 to develop and implement community-driven solutions to community needs in partnership with community-based organizations (Table 1.2). CalFresh Healthy Living community-based organization projects are intended to become fully funded CalFresh Healthy Living programmatic interventions.

Table 1.2 FFY 2022 Community-Based Organization Pilot Projects and the Communities They Served.

Project Name	Communities of Focus
Health Ambassadors Initiative: Latino Health	Latinos in Los Angeles and the Central Valley
Tribal Expansion Project	Native Americans in Tribes across California
Building Healthy Habits Initiative Early Childhood Education (BHHI-ECE)	Young children in Contra Costa and Yolo counties

The Tribal Expansion Project is one component of CalFresh Healthy Living's efforts to meet the United States Department of Agriculture (USDA) tribal consultation requirement. In FFY 2022, CalFresh Healthy Living continued to partner with the Tribal Ambassador Committee, composed of 16 members from 11 counties across California. In FFY 2022, the Tribal Ambassador Committee finalized a statewide needs assessment, which was conducted with California Tribes and tribal organizations to identify barriers and solutions to acquiring traditional foods, strengthening food sovereignty in California Tribal communities, and strengthening partnerships between CalFresh Healthy Living and California Tribal communities. The needs assessment results were used to inform new partnerships and to establish a foundation for community-based demonstration projects in FFY 2023.

California's State Nutrition Action Council

California's State Nutrition Action Council (SNAC) is a state-level collaborative with active representation from all state agencies and nonprofits implementing the USDA Food and Nutrition Services programs. In FFY 2022, SNAC members selected a new initiative on community gardens, the Community Garden Initiative. SNAC developed a fact sheet, an issue brief, and a planning guide to support local partners in planning new garden projects and will launch the Community Garden Initiative in FFY 2023.

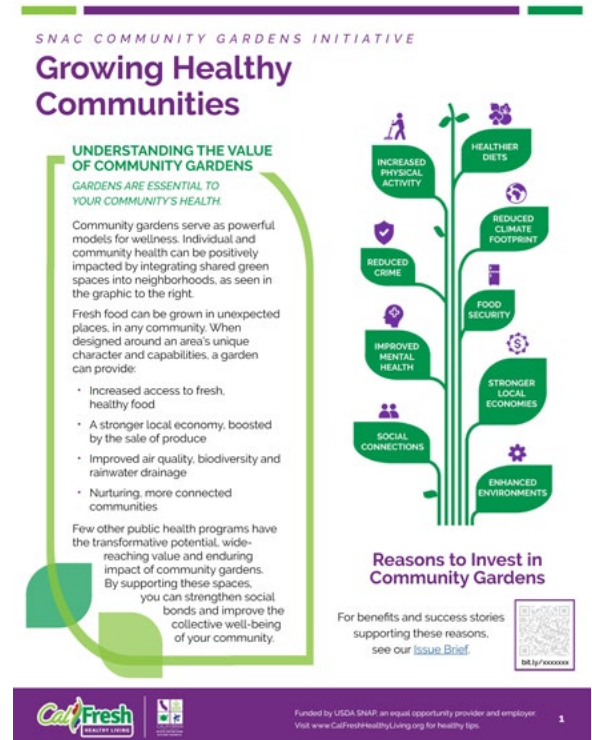
SNAC's previous campaign, the Farmers Market Initiative, was implemented in 10 counties and was fully transitioned to a locally driven CalFresh Healthy Living signature strategy in the summer of 2022. From FFY 2021 to FFY 2022, the redemption of CalFresh benefits increased on average by 28.5%, and monthly Market Match redemptions increased by 7.4%. In addition, average monthly CalFresh transactions increased by 16.3%.

Health Equity Assessment

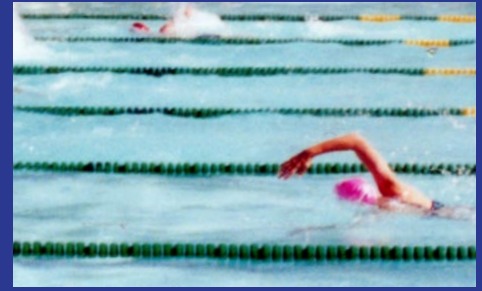
In FFY 2022, CalFresh Healthy Living conducted a Health Equity Needs Assessment to assess the needs and readiness of CalFresh Healthy Living implementers to address racial and health equity issues as well as to identify current best practices, and gaps in programming, services, or capacity. The assessment included a literature review, surveys with SIA and LIA staff, geospatial analysis, and key informant interviews with local and state leaders in health and racial equity. In FFY 2023, results will be presented to staff at all levels of CalFresh Healthy Living and will be used to make improvements to the equity efforts of the program.

Coordinated Evaluation Efforts

The USDA Food and Nutrition Services has provided a national directive to use the Program Evaluation And Reporting System (PEARS) database as the primary SNAP-Ed reporting system beginning in FFY 2023. In FFY 2022, CDSS provided baseline training for all SIAs and LIAs to ensure that there are shared reporting standards across implementing agencies that support California's ability to present statewide, aggregated results. CalFresh Healthy Living collaborates across the program to effectively use PEARS and improve data quality. Evaluation results of California's Direct Education programming are presented in the following section.



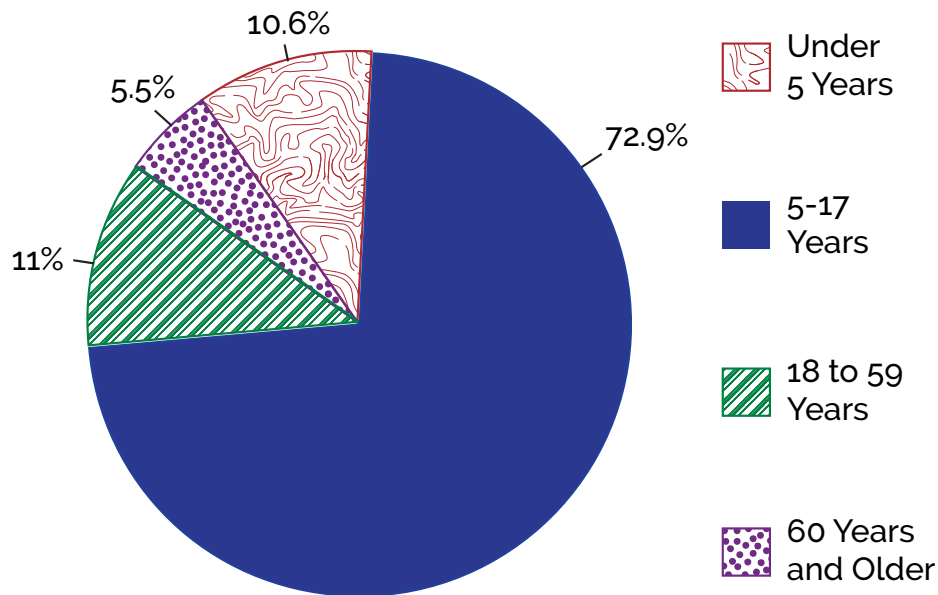
Cover of the SNAC Community Gardens Initiative Fact Sheet.



California SNAP-Shot: Direct Education

As part of their CalFresh Healthy Living work, State Implementing Agencies (SIAs) and Local Implementing Agencies conducted a total of 7,761 Direct Education interventions across 1,857 sites in Federal Fiscal Year (FFY) 2022. Direct Education interventions are interactive classes that use evidence-based nutrition and physical activity curricula. Figure 2.1 shows the ages of the 201,088 CalFresh Healthy Living Direct Education participants in FFY 2022.

Figure 2.1 Direct Education Participants' Years of Age (*n* = 201,088).



In FFY 2022, a total of 7,761 Direct Education interventions took place in 33 different types of settings, with 43.5% of interventions taking place in schools (K-12), followed by early care and education programs (16.6%) (Table 2.1). Figure 2.2 shows that most Direct Education interventions were conducted in person (70.9%), with 19.7% conducted virtually, and 7.4% through a mix of online and in-person.

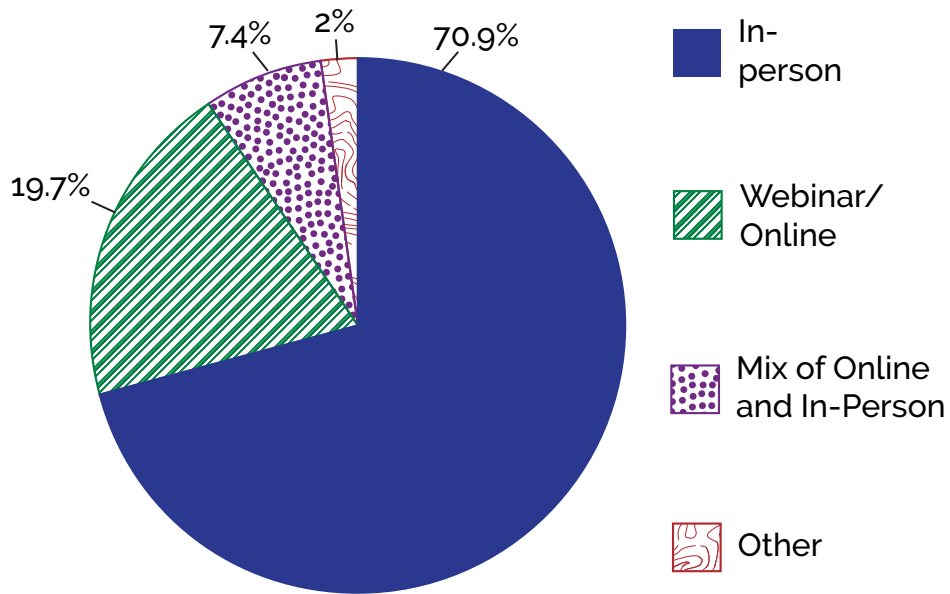
Table 2.1 Number and Percent of Direct Education Interventions by Setting.

Most Frequent Direct Education Settings	Number of Interventions	Percent of Interventions
1. Schools (K-12, elementary, middle, and high)	3376	43.5%
2. Early care and education facilities	1286	16.6%
3. Individual homes or public housing sites	622	8.0%
4. Before and after-school programs	567	7.3%
5. Family resource centers	228	2.9%
6. Health care clinics and hospitals	221	2.8%
7. Congregate meal sites & other senior nutrition centers	208	2.7%
8. Food assistance sites, food banks, and food pantries	195	2.5%
9. Parks and open spaces	173	2.2%
10. Adult education, job training, temporary assistance	155	2.0%

Table 2.1 Note: Only includes the 10 most frequent Direct Education intervention settings.



Figure 2.2 Delivery Method of Direct Education Interventions (n = 7,761).



Measuring Healthy Behaviors

In FFY 2022, CalFresh Healthy Living measured Supplemental Nutrition Assistance Program Education (SNAP-Ed) Evaluation Framework (USDA FNS, 2016) indicators MT1, Healthy Eating; MT2, Food Resource Management; and MT3, Physical Activity & Reduced Sedentary Behavior to assess the potential effectiveness of Direct Education interventions involving adults and children. Table 2.2 describes the sub-indicators in more detail and identifies whether the indicator was measured for adults or children.



Table 2.2 SNAP-Ed Indicators Reported for California for FFY 2022.

SNAP-Ed Indicators	Adults	Children
MT1 – Healthy Eating		
MT1c. Ate more than one kind of fruit	X	X
MT1d. Ate more than one kind of vegetable	X	X
MT1h. Drinking fewer sugar-sweetened beverages	X	X
MT1l. Cups of (or number of times) fruit consumed per day	X	X
MT1m. Cups of (or number of times) vegetables consumed per day	X	X
MT2 – Food Resource Management		
MT2b. Reach nutrition labels or nutrition ingredients lists	X	
MT2g. Not run out of food before month's end	X	
MT3 – Physical Activity and Reduced Sedentary Behavior		
		X

Direct Education Surveys

To evaluate series-based Direct Education interventions, pre/post surveys were used to measure potential changes in the indicators listed in Table 2.1. The first survey, a pre-test, was ideally administered during the first intervention session and a second survey, a post-test, was delivered at the end of the last intervention session. These two surveys were compared to measure any changes in self-reported behaviors. All interventions that had at least four sessions over one month and covered the selected topics were evaluated. Additionally, only questions related to topics that were covered in the curriculum were included in the analysis.

Currently, the SIAs administer a variety of surveys during some, but not all, of their Direct Education interventions. The Food Behavior Checklist administered to adults contained questions that could be combined across all the SIAs and are included in the aggregated analysis below. For children, data from the Eating and Activity Tool for Students survey for 4th through 8th graders were used for analysis. Indicators were analyzed using methods for paired data, including Wilcoxon signed-rank test for ordinal, non-parametric data, paired t-test for ordinal, normally distributed variables, and McNemar's test for agreement for categorical variables with only two categories. A significance level of 0.05 was considered statistically significant. Notes under each figure indicate the statistical test used.

Adult Direct Education Results

MT1c. Ate more than one kind of fruit.

A significant increase was found in how often adults reported consuming more than one kind of fruit each day ($p < 0.001$), (Figure 2.3).

Figure 2.3 “Do you eat more than one kind of fruit each day?”

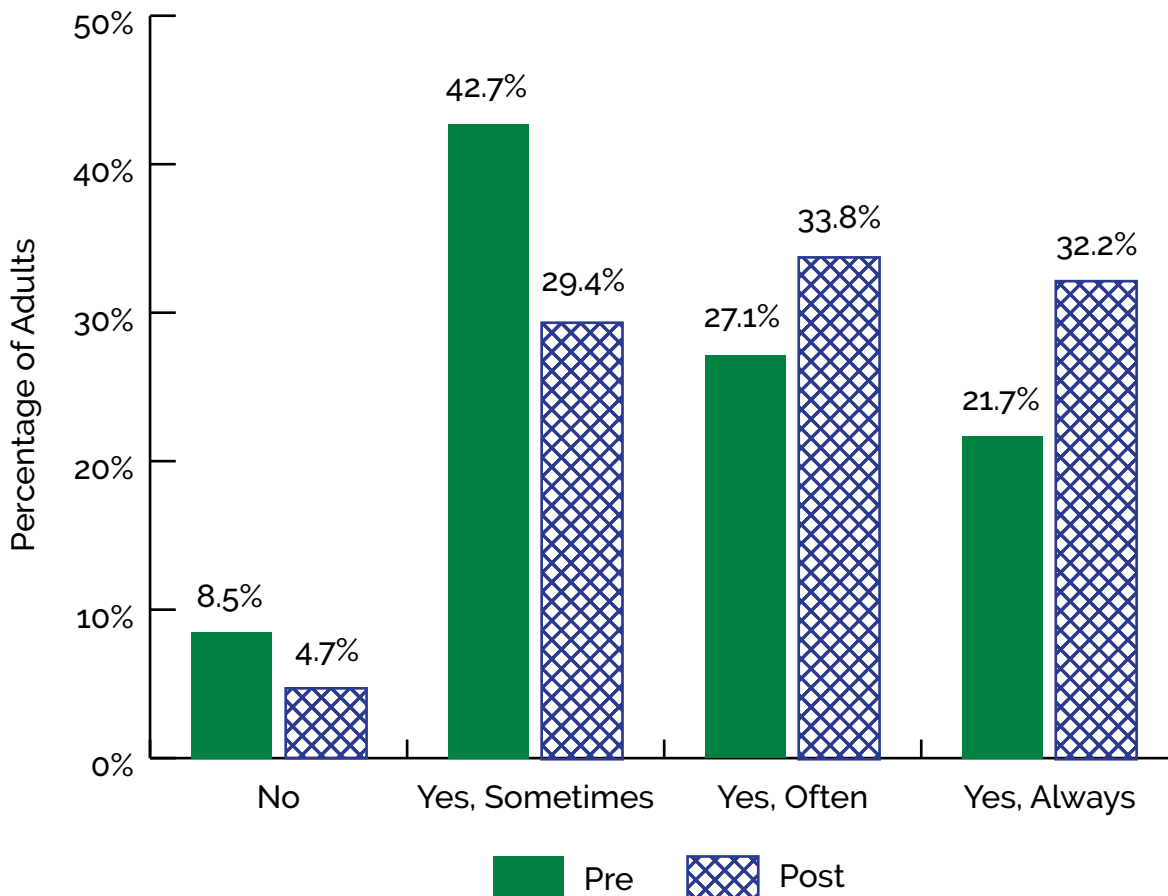


Figure 2.3 Wilcoxon signed-rank test ($n = 1,676$, $z = -14.1$, $p < 0.001$, $r = 0.24$).

MT1L. Cups of fruit consumed per day.

As depicted in Figure 2.4, there was also significant increase in the number of cups of fruit participants reported consuming each day, from an average of 1.32 cups to 1.62 cups ($p < 0.001$).

Figure 2.4 "Fruit: How much do you eat each day?"

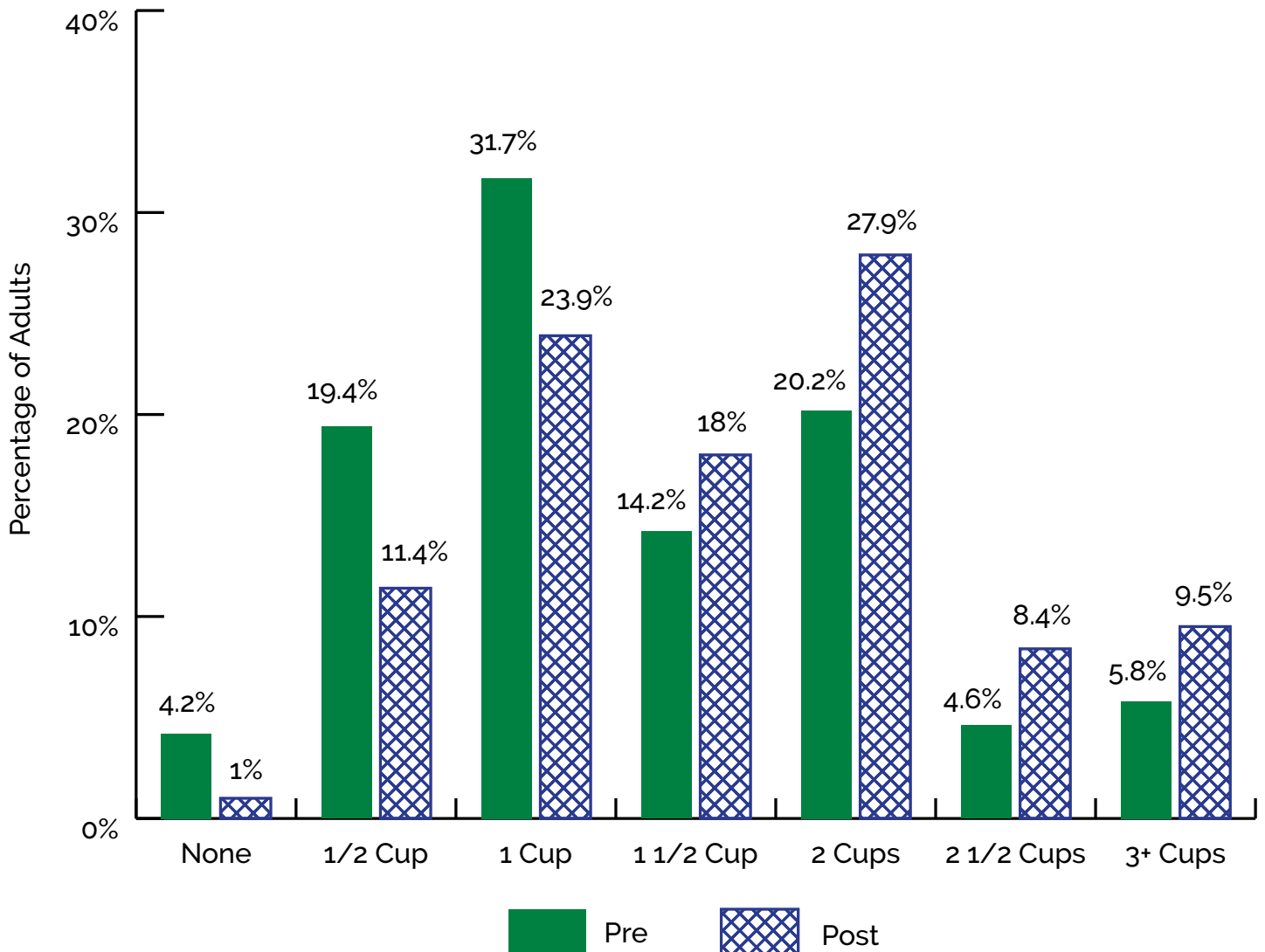


Figure 2.4 Paired-samples t -test, pre-test ($n = 1,981$, $M = 1.32$, $SD = 0.75$) post-test ($n = 1,691$, $M = 1.62$, $SD = 0.74$; $t(1679) = 17.49$, $p < 0.001$, $d = 0.40$).

MT1d. Ate more than one kind of vegetable.

A significant increase was found in how often adults reported consuming more than one kind of vegetable each day. (Figure 2.5).

Figure 2.5 "Do you eat more than one kind of vegetable each day?"

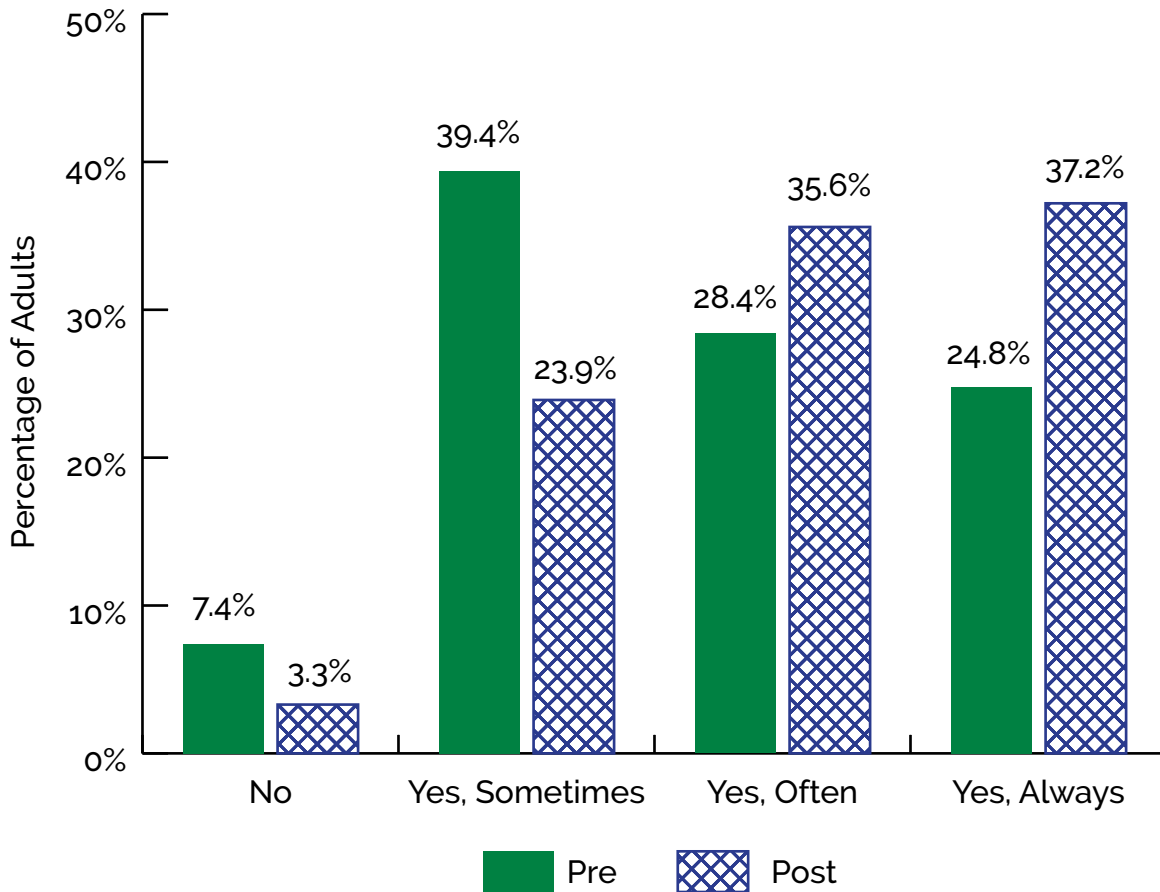
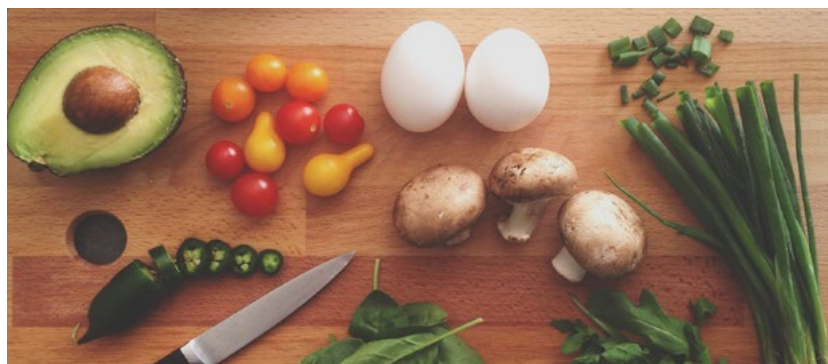


Figure 2.5 Wilcoxon signed-rank test ($n = 1,674$, $z = -16.09$, $p < 0.001$, $r = 0.28$).



MT1m. Cups of vegetables consumed per day.

As shown in Figure 2.6, there was a significant increase in the number of cups of vegetables that were consumed each day, from an average of 1.44 cups to 1.81 cups ($p < 0.001$).

Figure 2.6 "Vegetables: How much do you eat each day?"

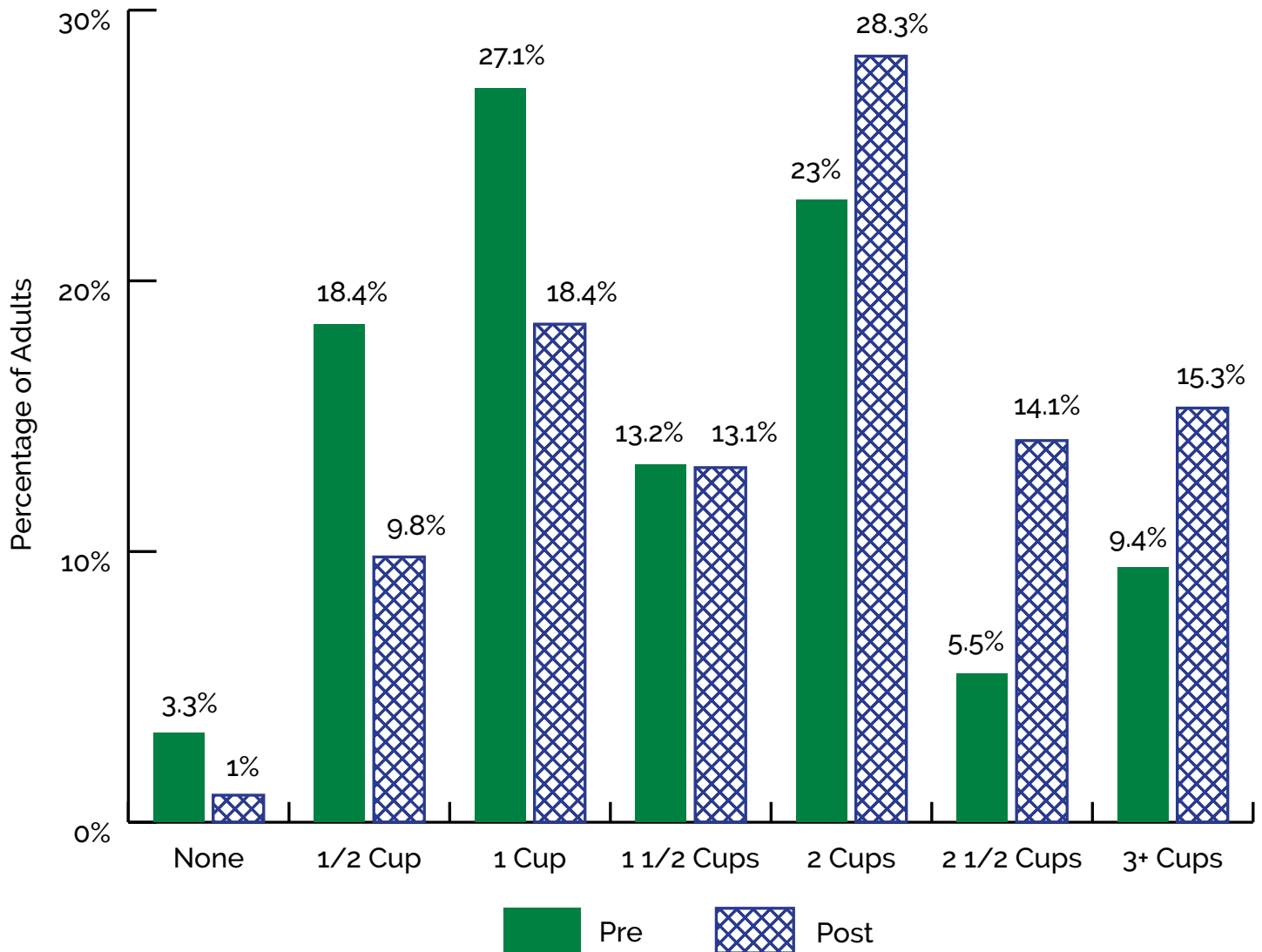


Figure 2.6 Paired-samples t -test, pre-test ($n = 1,686$, $M = 1.44$, $SD = 0.80$) post-test ($n = 1,682$, $M = 1.81$, $SD = 0.79$; $t(1675) = 20.47$, $p < 0.001$, $d = 0.46$).

MT1h. Drinking fewer sugar-sweetened beverages (SSB).

Participants were asked how often they drank fruit drinks, sports drinks, or punch and how often they drink regular soda. There was a significant decrease in the frequency of consumption of fruit drinks, sports drinks, or punch, and regular soda pre to post-survey (Figures 2.7 and 2.8).

Figure 2.7 "Do you drink fruit drinks, sports drinks, or punch?"

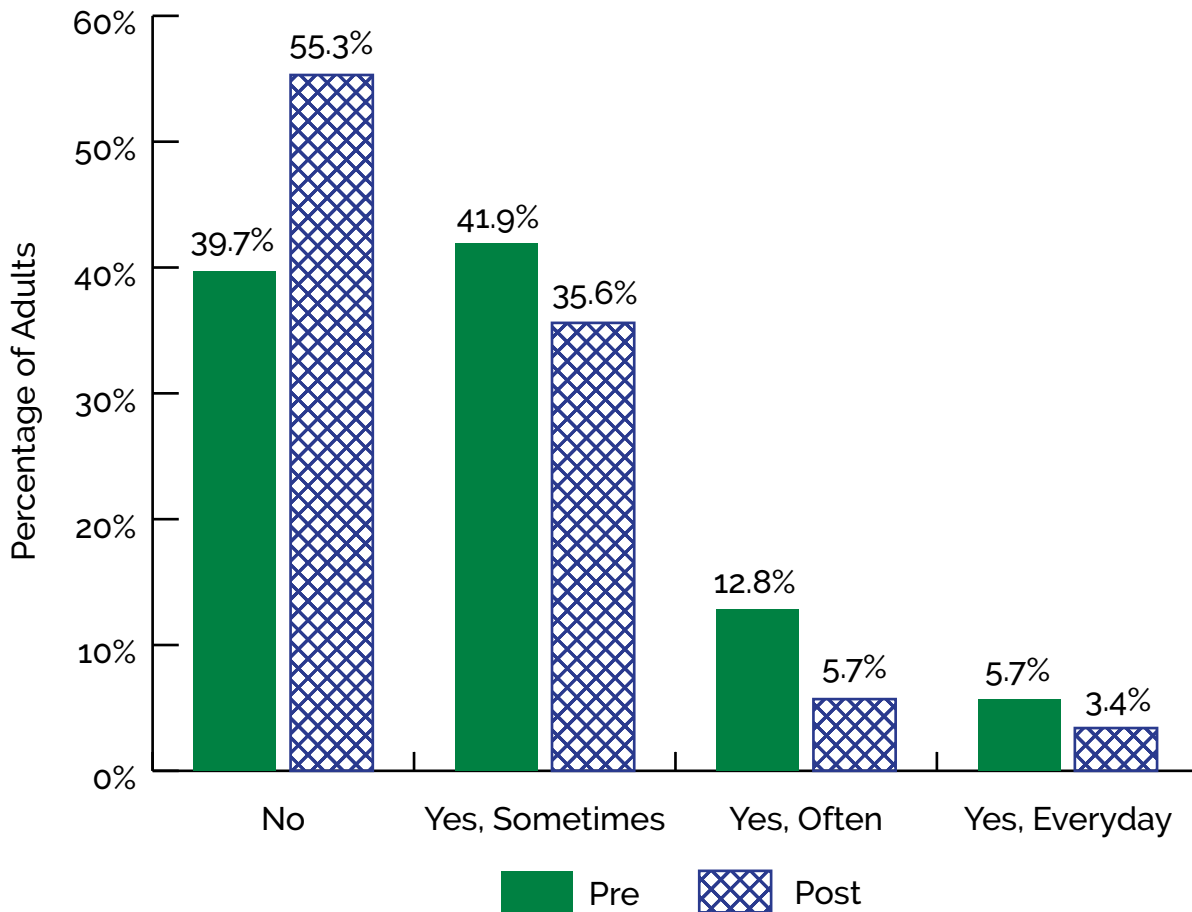


Figure 2.7 Wilcoxon signed-rank test ($n = 1,543$, $z = -12.39$, $p < 0.001$, $r = 0.22$).

Figure 2.8 "Do you drink regular soda?"

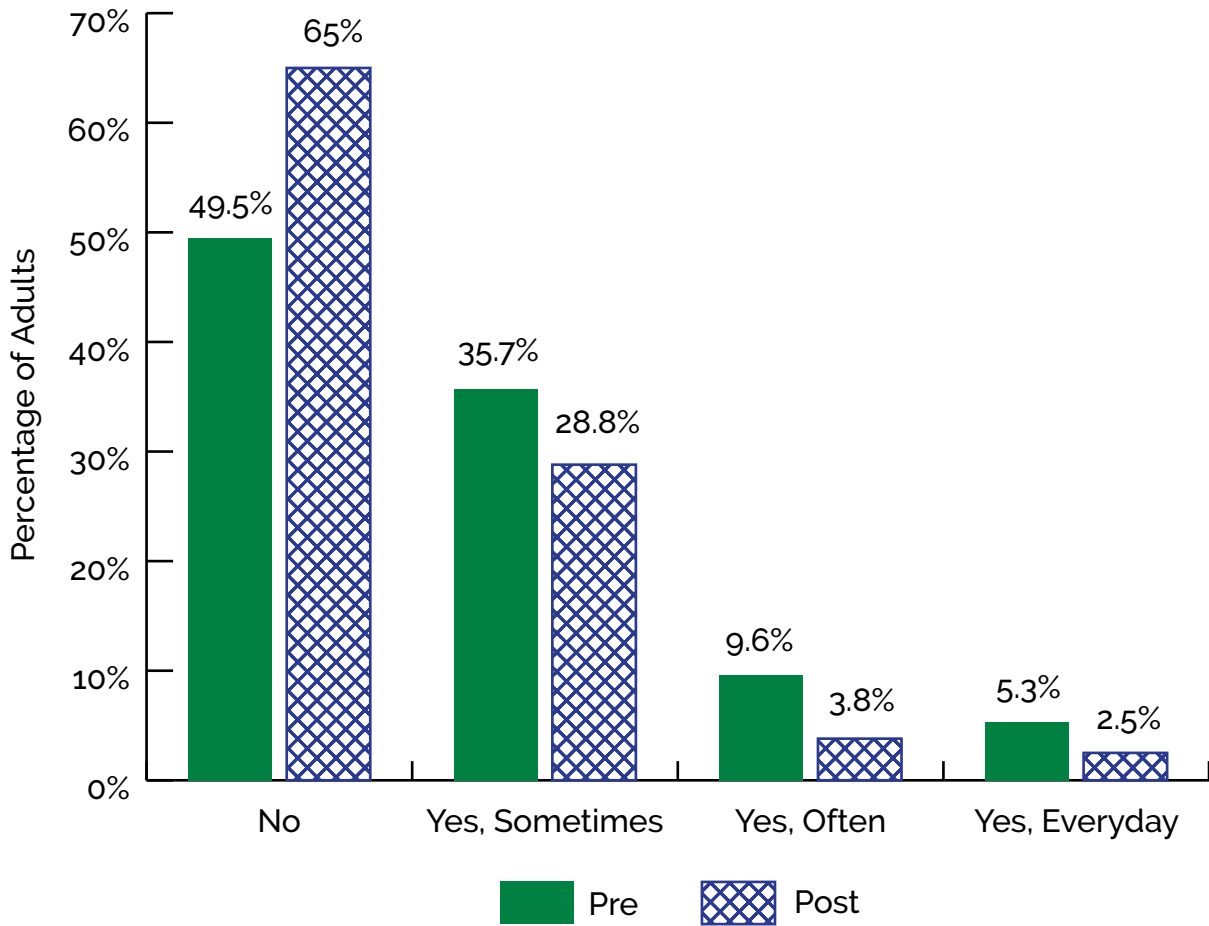


Figure 2.8 Wilcoxon signed-rank test ($n = 1,542$, $z = -13.39$, $p < 0.001$, $r = 0.24$).



MT2b. Read nutrition facts labels or nutrition ingredients lists.

There was a significant increase in how often adults reported that they read the nutrition labels when shopping for food, with 44.7% using labels least often pre-survey and 69.6% most often during post-survey (Figure 2.9).

Figure 2.9 “Do you use this label [nutrition facts or ingredients] when food shopping?”

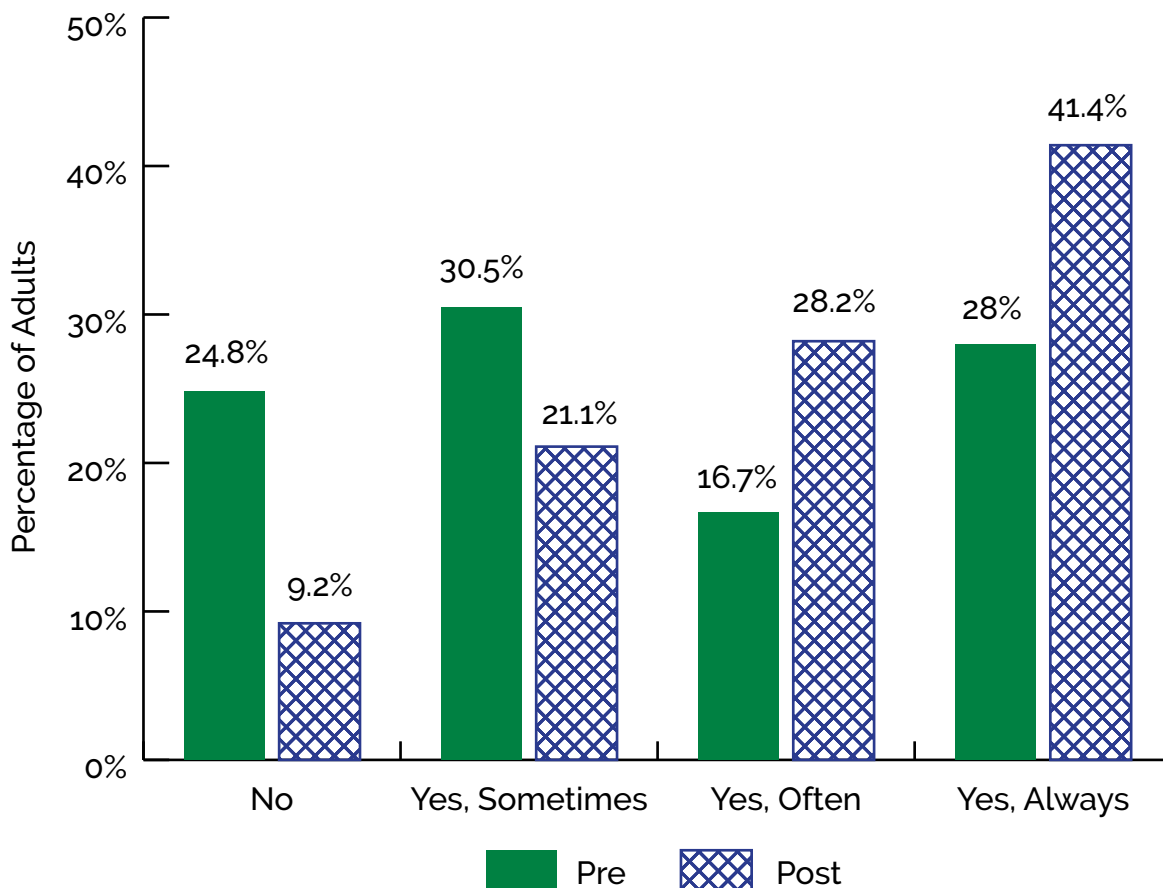


Figure 2.9 Wilcoxon signed-rank test ($n = 1,438$, $z = -16.96$, $p < 0.001$, $r = 0.32$).

MT2g. Not running out of food before month's end.

Food security was assessed by asking whether participants ran out of food before the end of the month. A significant decrease was shown in how often adults reported that they ran out of food before the end of the month. Adults reporting that they ran out of food decreased from 13.8% to 8.5% pre to post-survey. (Figure 2.10).

Figure 2.10 “Do you run out of food before the end of the month?”

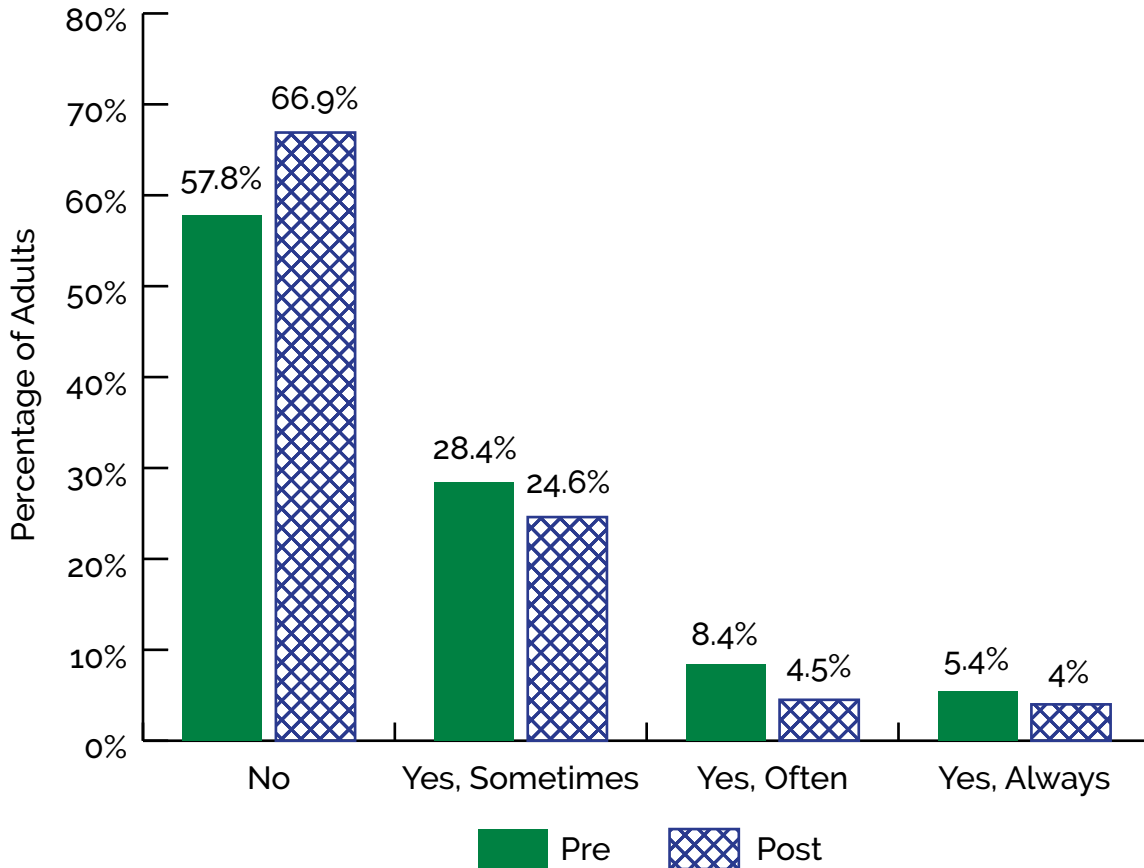


Figure 2.10 Wilcoxon signed-rank test ($n = 1,564$, $z = -8.27$, $p < 0.001$, $r = 0.15$).



Child Direct Education Results

MT1L. Fruit consumption.

To measure fruit consumption, children were asked how many times they ate fruit the previous day. As depicted in Figure 2.11, there was a significant increase in the number of times children reported consuming fruit each day, on average, from pre to post-survey (mean of 1.54 times to 1.72 times, $p < 0.001$).

Figure 2.11 “Yesterday, did you eat any fruit?”

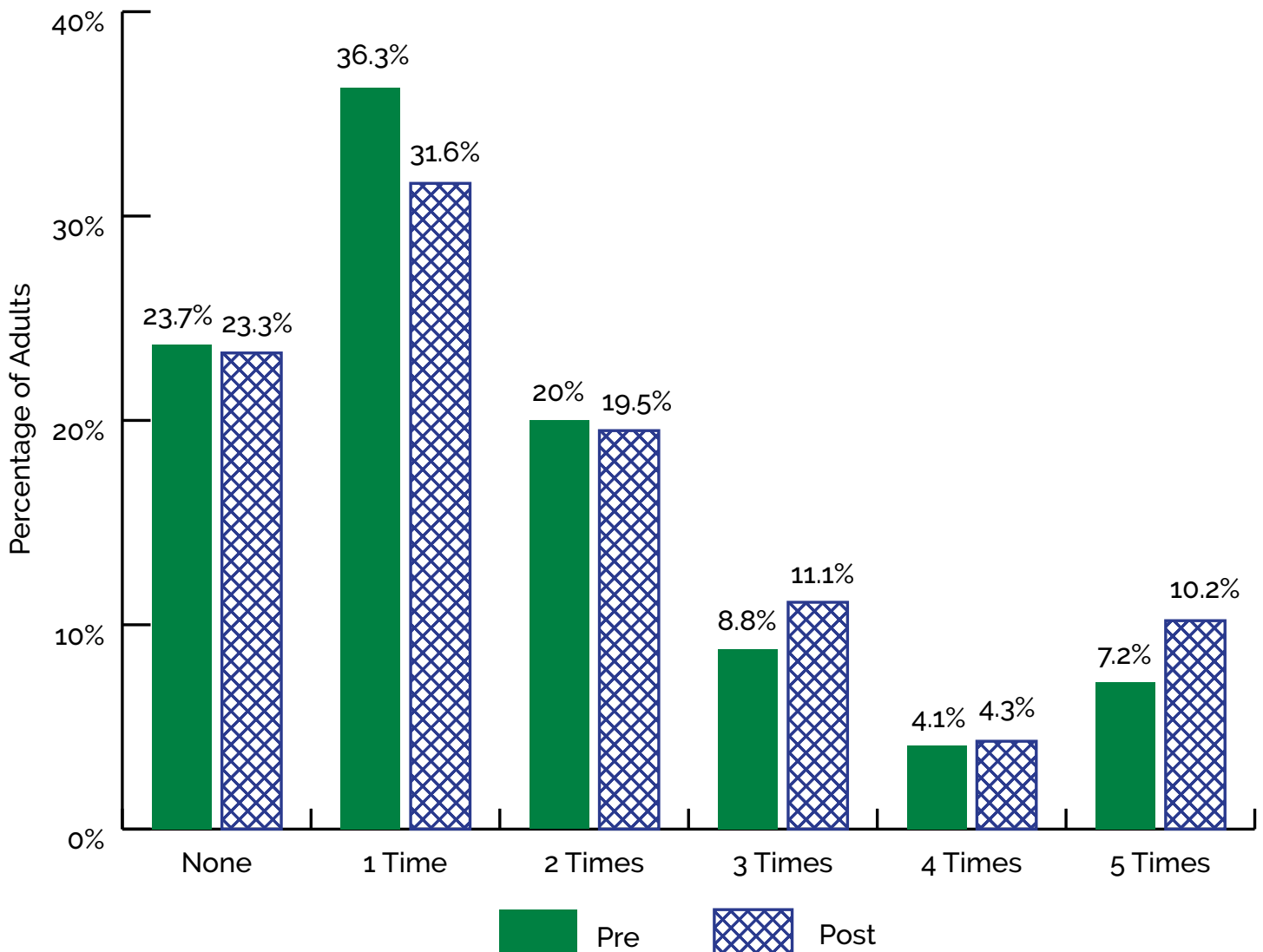


Figure 2.11 Paired-samples t -test, pre-test ($n = 1,760$, $M = 1.54$, $SD = 1.41$) post-test ($n = 1,759$, $M = 1.72$, $SD = 1.54$; $t(1750) = 4.35$, $p < 0.001$, $d = 0.12$).

MT1m. Vegetable consumption.

To measure vegetable consumption, children were asked how often they ate a variety of vegetables the previous day. To estimate total daily vegetable consumption, five questions measuring frequency of consumption of different types of vegetables, (i.e., starchy vegetables, orange vegetables, salads, and green vegetables, other vegetables, and beans) were combined. As shown in Figure 2.12, there was a significant increase in the number of times children ate vegetables each day, on average from pre to post-survey (mean of 2.95 times to 3.37 times per day, $p < 0.001$).

Figure 2.12 Number of times eating vegetables per day, combined variable.*

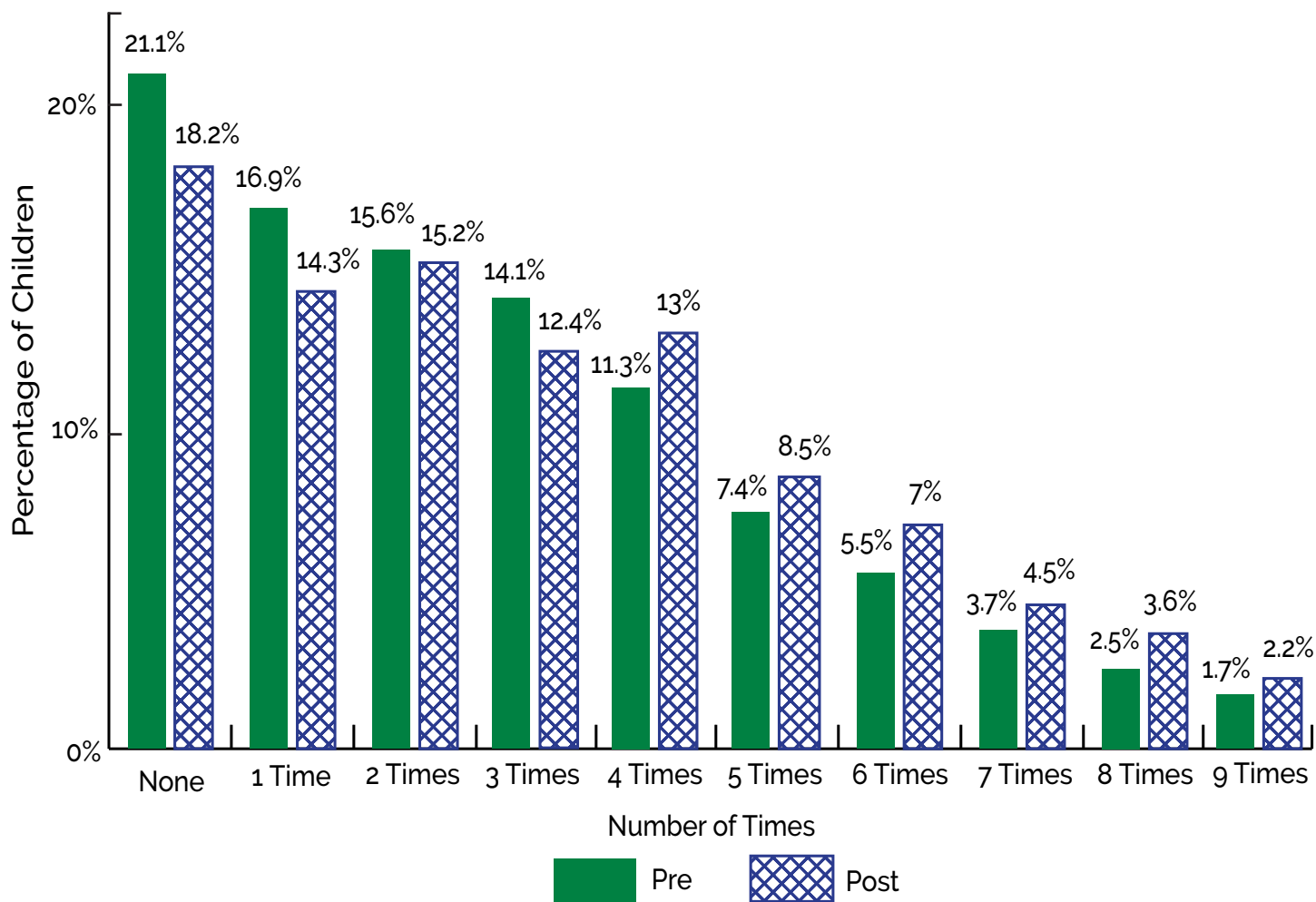


Figure 2.12 Note: Vegetable consumption was the sum of how often children ate any of the following: starchy vegetables, orange vegetables, salads and green vegetables, other vegetables, and beans.

Paired-samples *t*-test, pre-test ($n = 1,769$, $M = 2.95$, $SD = 2.77$) post-test ($n = 1,769$, $M = 3.37$, $SD = 2.93$; $t(1768) = 5.99$, $p < 0.001$, $d = 0.15$).

MT1d. Ate more than one kind of vegetable.

To determine if children ate more than one kind of vegetable the previous day, the vegetable consumption questions about frequency eating different types of vegetables were examined. A significant increase was found in the percentage of children consuming more than one kind of vegetable, from 60.2% to 65.6% pre- to post-survey, $p < 0.001$ (Figure 2.13).

Figure 2.13 Ate more than one kind of vegetable yesterday.

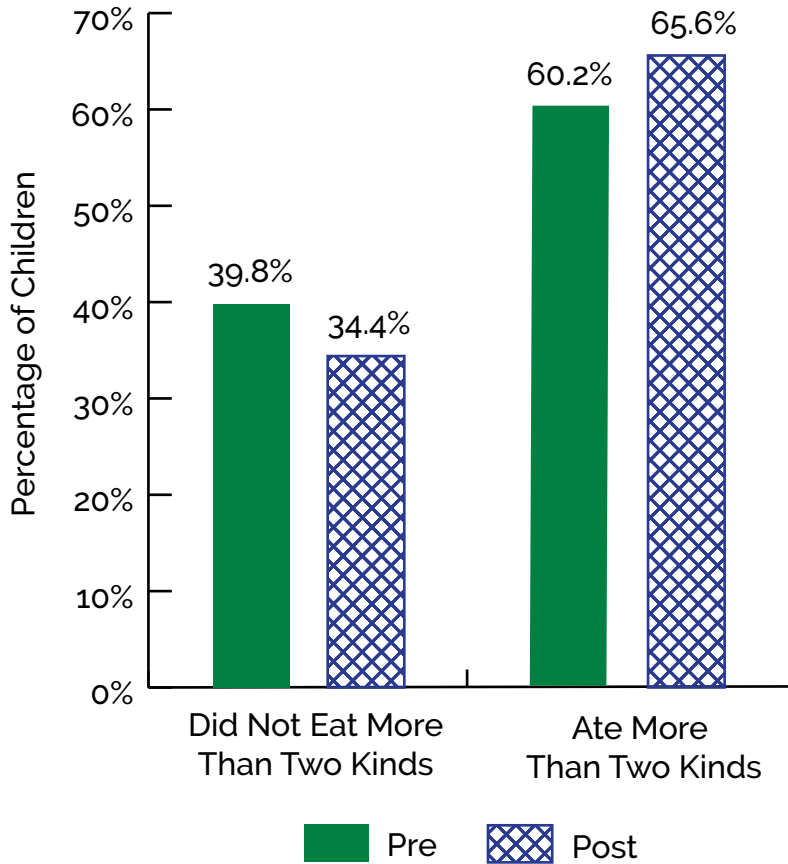


Figure 2.13 Note: Five questions about consumption of the following were used to determine if children ate more than one kind of vegetable: starchy vegetables, orange vegetables, salads and green vegetables, other vegetables, and beans.

McNemar's test, ($n = 1,766$, $X^2(1) = 17.03$, $p < 0.001$, $g = 0.09$).

MT1h. Drinking fewer sugar-sweetened beverages.

Six questions measured the consumption of sugar sweetened beverages, including fruit drinks, sports drinks, regular soda, energy drinks, sweetened coffee or tea and flavored milk. The analyses exclude children who never reported consuming each beverage. No significant differences between pre- and post-survey were found for the frequency of consumption of sugar sweetened beverages in children.

MT3. Physical activity.

A significant increase in how many days per week children reported being physically active for at least 60 minutes per day pre- to post-survey (mean of 3.03 days to 3.64 days, $p < 0.001$). Additionally, the percentage of children that were physically active seven days per week increased from 9.8% to 16.7% (Figure 2.14).

Figure 2.14 “Last week, on how many days were you physically active for a total of at least 60 minutes (1 hour) per day?”

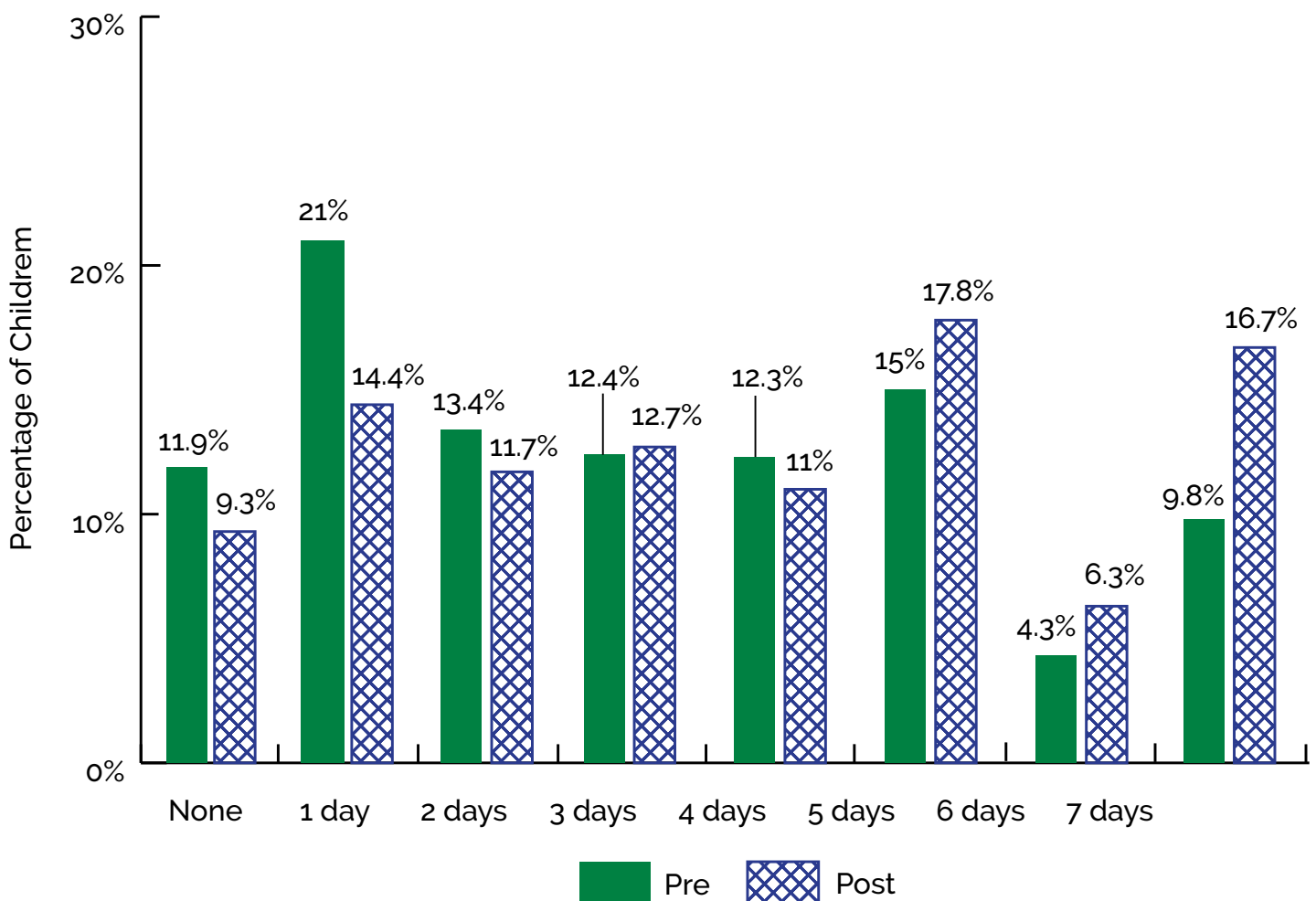


Figure 2.14 Paired-samples *t*-test, pre-test ($n = 1,214$, $M = 3.03$, $SD = 2.17$) post-test ($n = 1,214$, $M = 3.64$, $SD = 2.28$; $t(1213) = 8.51$, $p < 0.001$, $d = 0.27$).

Summary of Results

A total of eight analyses were conducted for adults, all of which were statistically significant. For children, 10 analyses were conducted, four of which were statistically significant. Sugar-sweetened beverage consumption, which made up six of the analyses, did not change for children pre- to post-survey. For each of the statistically significant results, an effect size was calculated. An effect size can be thought of as the measure of the magnitude of the change. This means that an analysis that resulted in a larger effect size indicates a larger and more meaningful change in the behaviors reported by Direct Education participants. Three measures of effect size were used based on the two types of analyses that were performed: the *d* statistic, *r* statistic, and *g* statistic. Each statistic has its range of values indicating whether the effect size is small, medium, or large, as shown in Table 2.3 (Cohen, 1988).



Table 2.3 Effect Size Ranges.

Effect Size	Small	Medium	Large
<i>d</i>	0.20	0.50	0.80
<i>r</i>	0.10	0.30	0.50
<i>g</i>	0.05	0.15	0.25

Table 2.4 (adults) and Table 2.5 (children) provide the effect sizes for each statistically significant result, along with an interpretation of each effect size. Those analyses with a significant result but a trivial effect size are considered to not have resulted in a meaningful change from pre-survey to post-survey.

Of the eight statistically significant results for adults, seven showed small effect sizes and one was associated with a medium effect size (Table 2.4).

Table 2.4 Effect Sizes of CalFresh Healthy Living Direct Education Findings for Adults.

Indicator	Description	Effect Size	Interpretation
MT1c	More than one kind of fruit	$r = 0.24$	Small effect
MT1d	More than one kind of vegetable	$r = 0.28$	Small effect
MT1h	Fruit drinks, sports drinks, punch	$r = 0.22$	Small effect
MT1h	Soda	$r = 0.24$	Small effect
MT1l	Cups of fruit per day	$d = 0.40$	Small effect
MT1m	Cups of vegetables per day	$d = 0.46$	Small effect
MT2b	Nutrition facts label	$r = 0.32$	Medium effect
MT2g	Run out of food	$r = 0.15$	Small effect

Of the four significant results for children, two results showed small effect sizes while two had effect sizes that were trivial or too small to be considered meaningful. Effect sizes were calculated to assess the magnitude of the change (Table 2.5).

Table 2.5 Effect Sizes of CalFresh Healthy Living Direct Education Findings for Children.

Indicator	Description	Effect Size	Interpretation
MT1d	More than one kind of vegetable	$g = 0.09$	Small effect
MT1l	Cups of fruit per day	$d = 0.12$	Trivial effect
MT1m	Cups of vegetables per day	$d = 0.15$	Trivial effect
MT3	Physical activity	$d = 0.27$	Small effect

These results demonstrate that the SIAs and their local partners were able to deliver Direct Education interventions that resulted in significant healthful changes for participants, particularly in adults.



California SNAP-Shot: Policy, Systems, and Environmental Change

CalFresh Healthy Living delivers locally driven Policy, Systems, and Environmental change interventions and strategies (PSEs) through its Local Implementing Agency (LIA) network. PSEs improve health in California communities by increasing access to healthy food, promoting healthy dietary choices, and expanding opportunities for physical activity. Below are the definitions that CalFresh Healthy Living uses to define PSEs:

1. **Policy changes** refer to the establishment or improvement of written, health-related rules, regulations, ordinances, and procedures designed to guide behaviors.
2. **Systems changes** are defined as modifications to the ways in which business is done across a network of agencies, organizations, or institutions, rather than through policy.
3. **Environmental changes** are direct modifications to the physical, economic, or social environment.

PSEs include all PSE work from the planning stages to the maintenance stages. PSE changes include only implemented PSE work and exclude earlier stage work like planning, assessing the need, and organizational readiness.

In Federal Fiscal Year (FFY) 2022, there were PSE changes in 1,357 sites throughout the state. PSE changes were delivered in 53 of California's 58 counties. PSE changes reached an estimated 1,867,130 CalFresh Healthy Living-eligible Californians.



PSE Changes by Type of Approach

In FFY 2022, LIAs reported 5,333 total PSE changes, comprised of 2,484 environmental changes, 2,062 system changes, and 787 policy changes (Figure 3.1). These changes included 3,692 nutrition changes, 1,614 physical activity changes, as well as 27 changes across both nutrition and physical activity. Table 3.1 shows the top five nutrition PSE changes and Table 3.2 shows the top five physical activity PSE changes for FFY 2022.

Figure 3.1 PSE Changes by Type of Approach: Policy, Systems, and Environmental, FFY 2022 (n = 5,333).

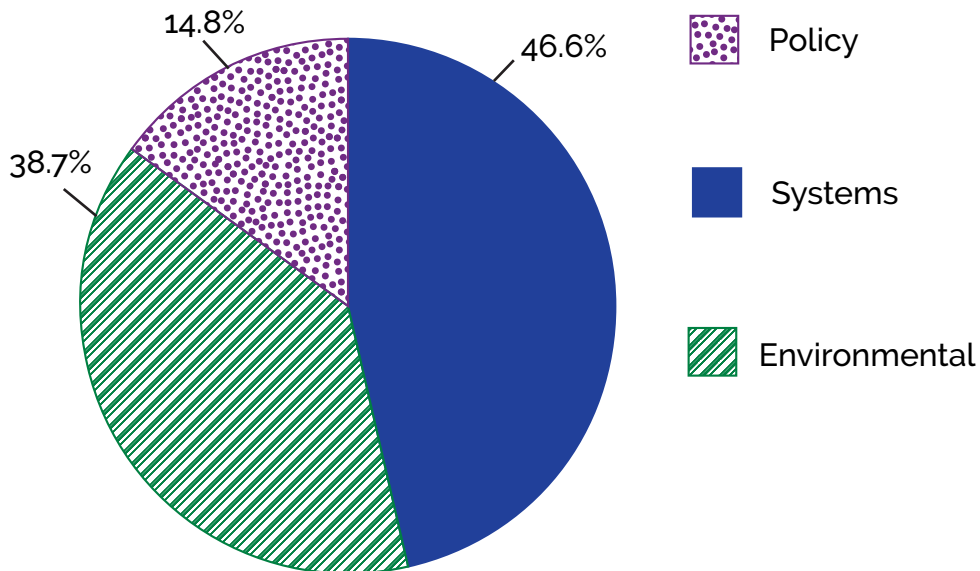


Table 3.1 Top Five Nutrition PSE Changes for FFY 2022.

Nutrition PSE Changes	Number of Changes
1. Initiated or expanded use of edible gardens for nutrition education	331
2. Edible gardens (establish, reinvigorate, or maintain food gardens)	281
3. Increased opportunities for parents, students, or community members to work in the garden	239
4. Utilized onsite garden produce for site meals or snacks	142
5. Used an interactive educational display, to prompt healthy eating behavior choices close to the point of decision	139

Table 3.2 Top Five Physical Activity PSE Changes for FFY 2022.

Physical Activity PSE Changes	Number of Changes
1. Increased or improved opportunities for structured physical activity	227
2. Improved quality of structured physical activity (non-PE)	198
3. Improved or expanded physical activity facilities, equipment, structures, or outdoor space	141
4. Increased or improved opportunities for unstructured physical activity time/free play	121
5. Improved quality of physical education	119

PSE Changes by Setting

Figure 3.2 displays settings where PSE changes took place in FFY 2022. The most common settings for PSE changes were schools (29.1%), followed by early care and education facilities (19.7%), and then food assistance sites, food banks, and pantries (13.9%).

Figure 3.2 Number of PSE Sites per Setting, FFY 2022.

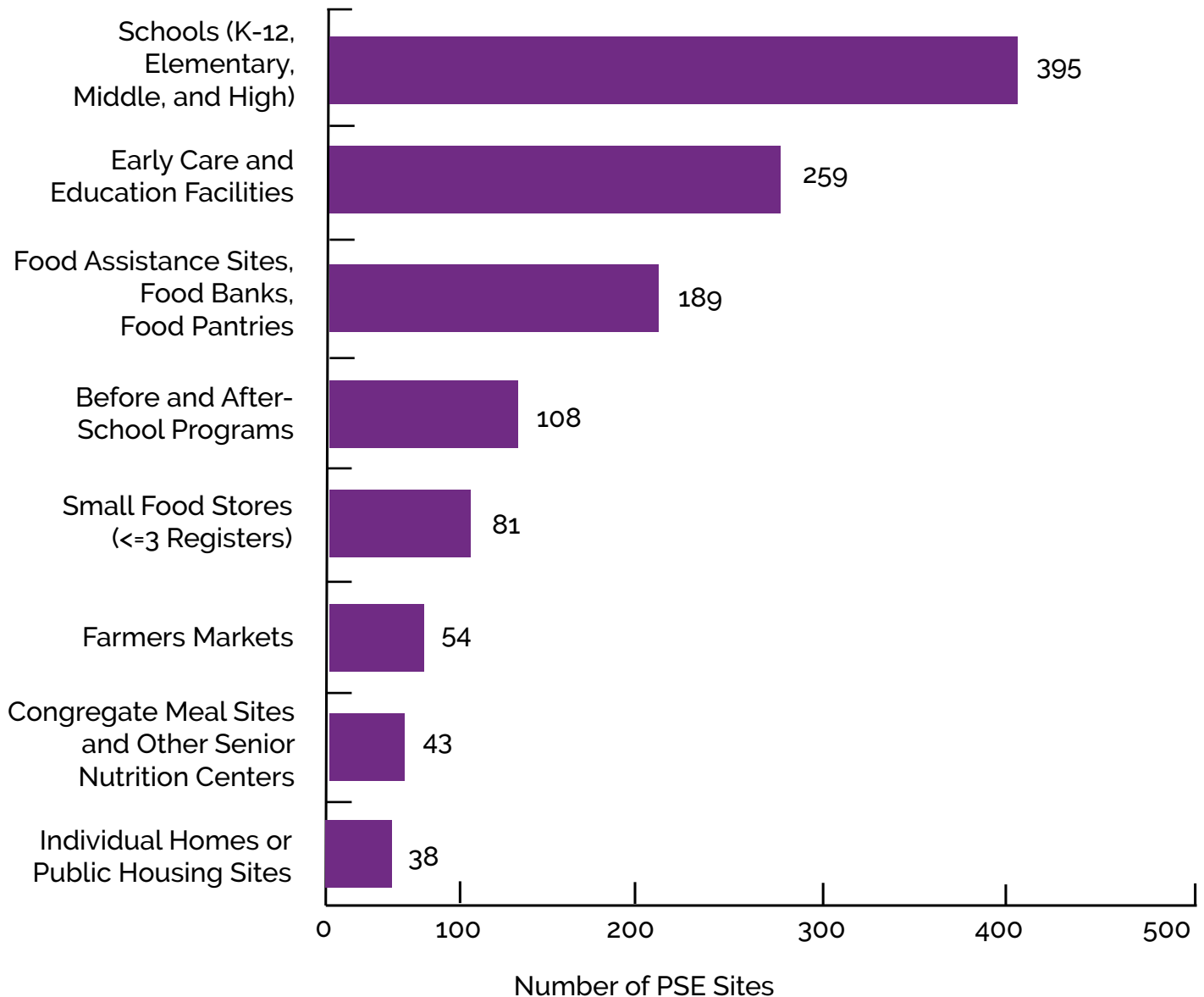
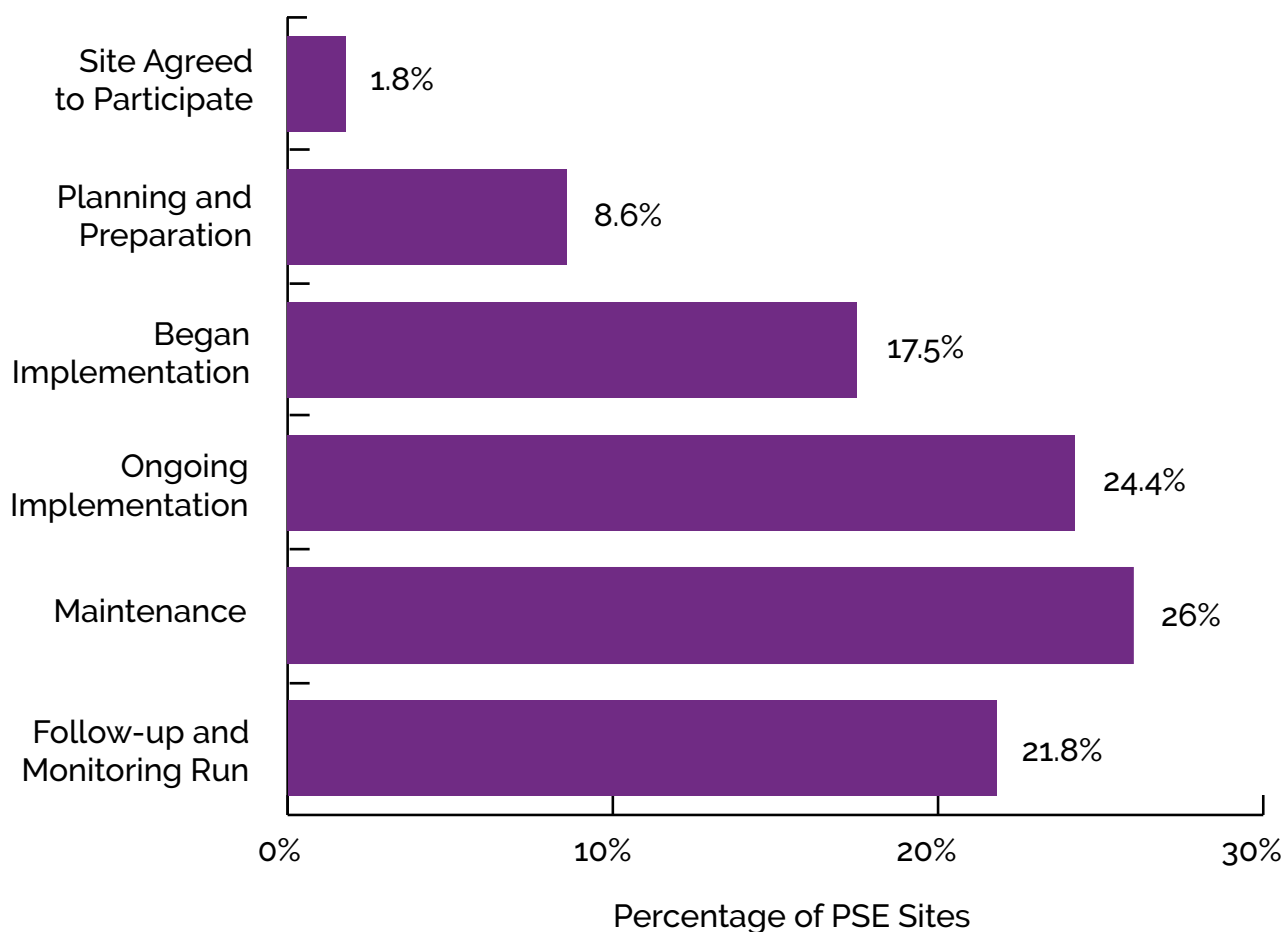


Figure 3.2 Note: Only includes sites where implementation has already begun and settings with 30 sites or more (total number of unique settings = 27).

Planning Stages of FFY 2022 PSEs

As shown in Figure 3.3, 10.4% ($n = 141$) of the 1,357 PSE sites reported in FFY 2022 were reported to be in the beginning stages of PSE implementation, which includes contacting sites, planning, and preparation. An additional 17.5% of PSE sites ($n = 238$) were beginning implementation, 24.2% ($n = 329$) were in the ongoing implementation stage, and 47.8% ($n = 649$) were in the maintenance and monitoring stage for their PSE activities.

Figure 3.3 Planning Stages of PSE Sites in FFY 2022 ($n = 1,357$).



LIAs indicated factors that facilitated their PSE work as well as factors that were barriers. Facilitators of PSE work for FFY 2022 were reported for 1,025 PSE sites. The top three facilitators were the buy-in or motivation of partners, such as administration, staff, teachers, farmers, or retailers (81.2%), communications (39.8%), and equipment, facilities, and space (39.0%) (Figure 3.4). Barriers were reported for 1,018 PSE sites. The top three reported barriers were time on the part of teachers, staff, and others (61.7%), staff turnover (34.2%), and competition from unhealthy options (25.4%) (Figure 3.5).

PSEs are implemented through partnerships between CalFresh Healthy Living implementers and

community leaders, community members, businesses, and other individuals and organizations. CalFresh Healthy Living played a lead or major role at 1,357 PSE sites in FFY 2022 by initiating efforts (63.4%), fostering engagement (24.1%), providing guidance (54.5%), providing training (48.3%), funding implementation (46.9%), and providing evaluation (48.9%) (Figure 3.4).

Figure 3.4 Top Three Facilitators of PSE Work in FFY 2022 (n = 1,025).

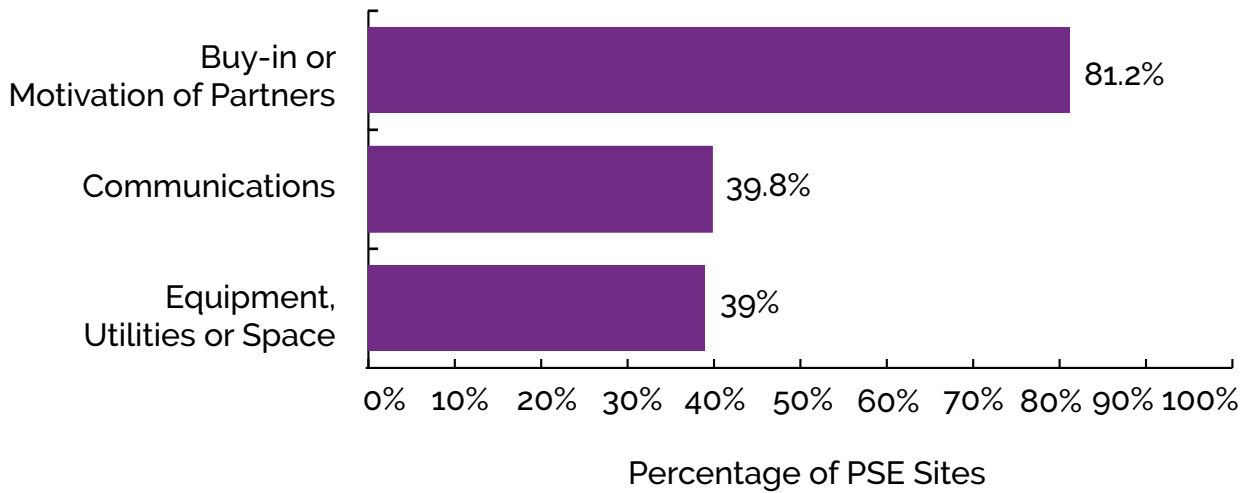


Figure 3.4 Note: Respondents could select more than one facilitator.

Figure 3.5 Top Three Barriers to PSE Work in FFY 2022 (n = 1,018)

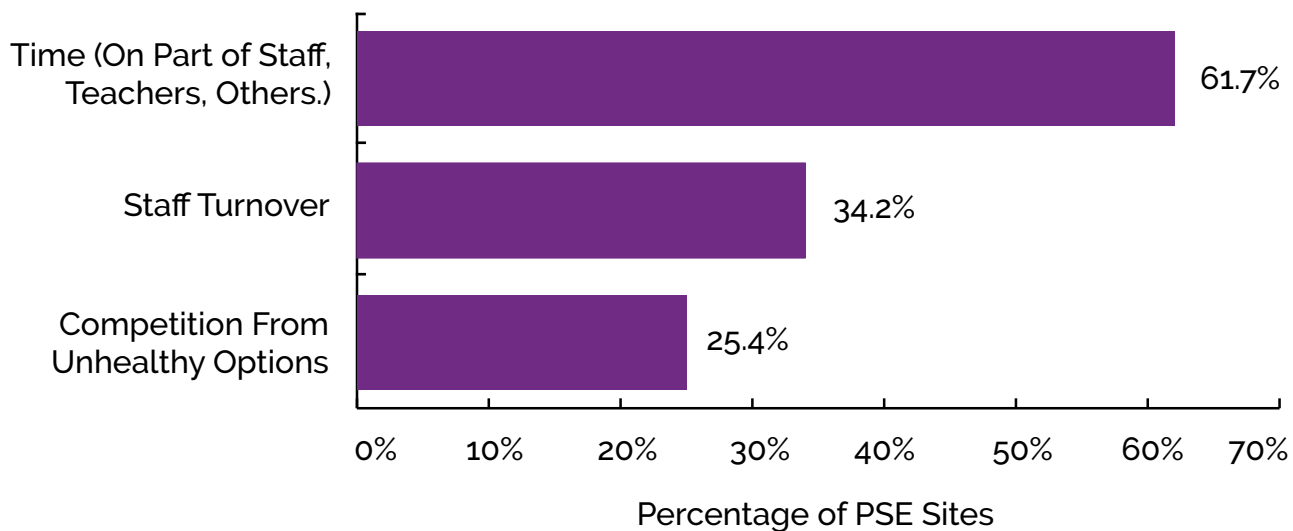


Figure 3.5 Note: Respondents could select more than one barrier.

Funding and Sustainability

PSEs are implemented through partnerships between CalFresh Healthy Living implementers, community leaders, community members, businesses, and other individuals and organizations. CalFresh Healthy Living played a lead or major role at 1,357 PSE sites in FFY 2022 by initiating efforts (63.4%), fostering engagement (24.1%), providing guidance (54.5%), providing training (48.3%), funding implementation (46.9%), and providing evaluation (48.9%) (Figure 3.6).

Figure 3.6 Role of CalFresh Healthy Living in PSEs, FFY 2022 (n = 1,357).

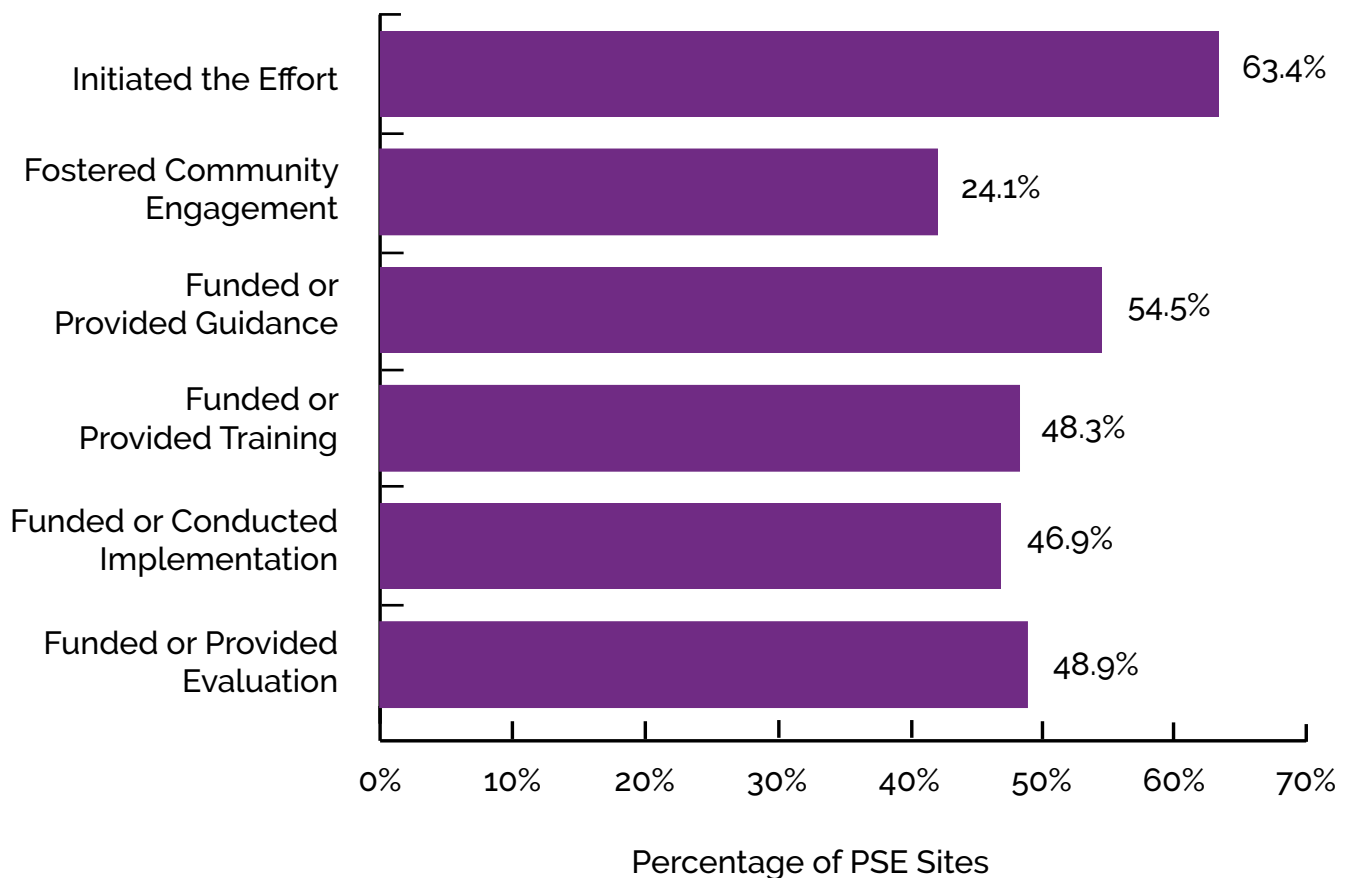
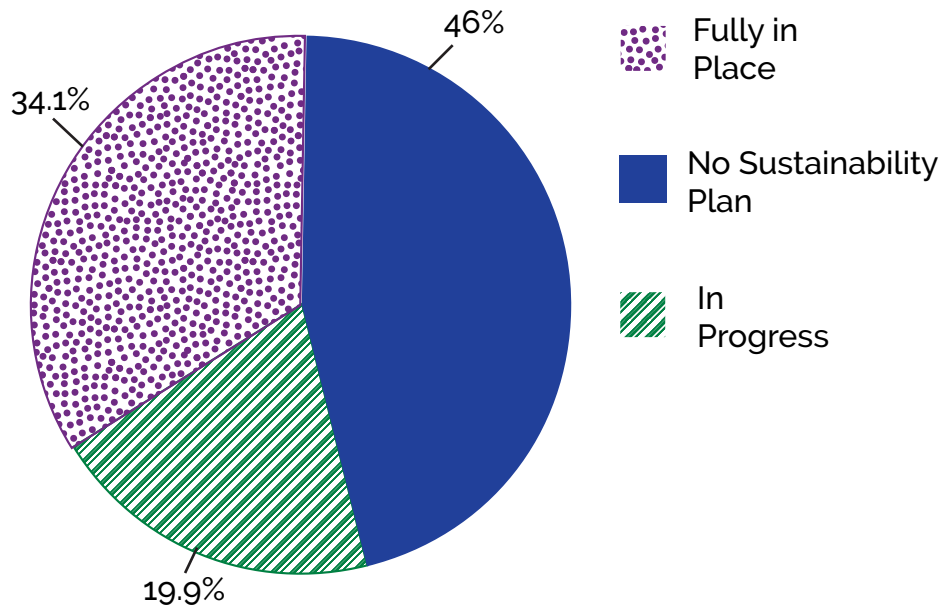


Figure 3.6 Note: CalFresh Healthy Living may fulfill more than one role.

Shown in Figure 3.7, of sites with PSE changes in FFY 2022 ($n = 1,357$), 54.0% ($n = 733$) had a sustainability plan in process ($n = 270$) or fully in place ($n = 463$).

Figure 3.7 Sustainability Plan Progress, FFY 2022 ($n = 1,357$).



Of the PSEs that had a sustainability plan fully in place ($n = 463$), 35.0% of the organizations had assumed responsibility, 27.9% had identified ongoing funding to support these PSEs, 41.0% had adopted policies, 52.5% had a reporting system implemented and 71.3% had stakeholders' support (Figure 3.8).



Figure 3.8 Percentage of PSEs with a Sustainability Plan by Sustainability Mechanism Reported in FFY 2022 (n = 463).

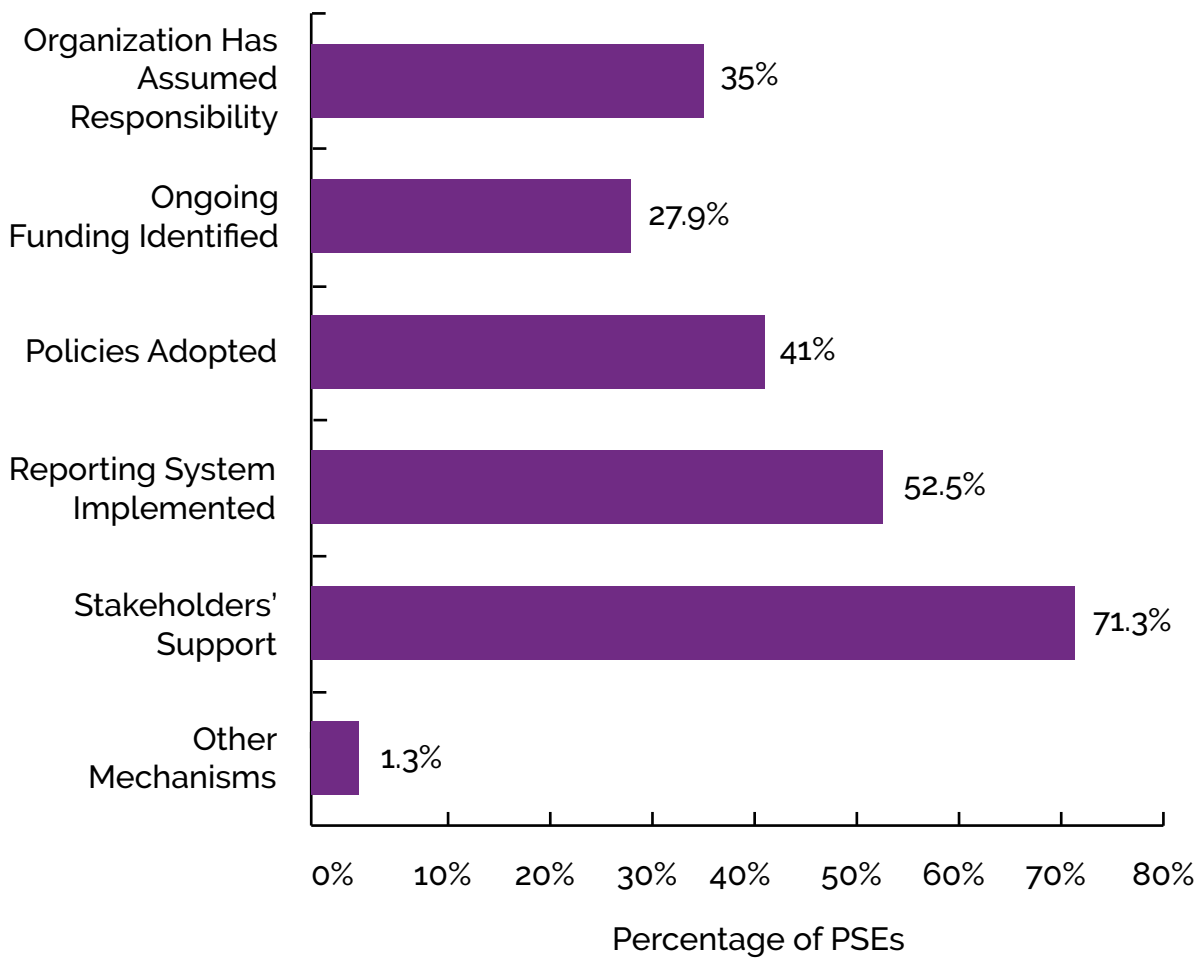


Figure 3.8 Note: There could be multiple mechanisms in place for sustainability.

Despite the ongoing COVID-19 pandemic, SIAs and LIAs continued to adapt their programs and continue CalFresh Healthy Living PSEs. CalFresh Healthy Living research has demonstrated that census tract areas with higher numbers of PSEs have improved health behavior outcomes (Molitor, Sugerman, & Sciortino, 2016) and will continue to prioritize investment in PSEs to support sustainable changes.



California Snap-Shot: Success Stories

Success Stories are specific examples of the difference that the CalFresh Healthy Living program makes in communities. Below are highlights from the many successes accomplished throughout the year.

New Line Dancing Program Yields High Participation, Engaged Seniors

At Innovative Health Solutions, a senior center in Solano County, and subcontractor for the Napa/Solano Area Agency on Aging, a group of older women gathered weekly to line dance using easy, low-impact, repetitive movements that they had memorized. This sparked an idea for Innovative Health Solutions, who researched and found that there were many health benefits from dancing, and that line dancing can be modified to be culturally relevant for different groups. Innovative Health Solutions developed a new line dancing curriculum, *Everyone Loves Line Dancing*, to combine culturally relevant line dances for priority



"All seniors should line dance. It has built my confidence. I now help other line dancers that are struggling because I know how it feels. Line dancing keeps me social, helps the arthritis in my knees and helps me forget about my problems. It does not matter if you are good, bad or mess up – just keep moving and you will get it."

populations with the ability to modify the dances for different fitness and mobility levels. The curriculum includes dance steps and videos to teach line dances including Latin, Soul, Country, and Filipino styles. The line dancing curriculum can be conducted in a variety of settings, such as parks, recreation sites, senior centers, affordable senior housing locations, and health events.

The curriculum was piloted in Federal Fiscal Year (FFY) 2022, with 52 classes conducted at five different sites with more than 255 participants. During the pilot, many diverse community partners came together to formalize this new curriculum; for example, the Filipino Community Center helped to choreograph line dances to contemporary favorites in Tagalog. In FFY 2023, more pilot sites, including virtual classes, will be added.

All Meals, For All Residents, At All Times: Leveraging Partnerships to Maintain Nutrition Standards

Sam Jones Hall (SJH) is a homeless shelter operated by Catholic Charities of the Diocese of Santa Rosa (CCDSR) that houses 140 residents. SJH faced severe staffing shortages and increased demand, so they contacted CalFresh Healthy Living for help providing fully prepared meals. CCDSR CalFresh Healthy Living staff reached out to their partner Redwood Empire Food Bank (REFB). REFB's Chef Don Nolan was reopening his on-site kitchen for the first time since the pandemic began and gladly accepted the challenge, stating, "We're doing it because we know [CCDSR] would do the same for us."

The CalFresh Healthy Living staff and Chef Don maintained SJH's and REFB's high nutrition standards for meals, which were low in sodium, saturated fat, and added sugar and included at least two vegetables and four of the five food groups. With REFB, CCDSR leveraged additional partnerships to



"When your family is preparing a meal at home, they're putting it together with love, you know? And that's what we're doing here, putting together something we know is nutritious, it's tasty, it's good for them. And we're preparing it with love and respect."

– Chef Don Nolan

procure healthy ingredients. Farm to Pantry (F2P), a partner organization, provided most of the vegetables, with a few anonymous donors providing vegetables from their own gardens. Catholic Charities Rural Food Project provided logistical support to transport the meals between the food bank and the shelter. This project strengthened pre-existing partnerships and served as a clear reminder that leveraging multiple partnerships is essential to ensuring that residents receive the nourishment they deserve.

Farmers Market Navigators Program Increases Access to Healthy, Local Foods

In response to the underutilization of CalFresh/Electronic Benefits Transfer (EBT) payments and Market Match at farmers markets in Paso Robles, the University of California Cooperative Extension (UCCE) developed a Farmers Market Navigator program in partnership with local organizations. UCCE staff collaborated with local Promotores (community health workers) to train community leaders to become Farmers Market Navigators. Starting in March 2022, the navigators increased community awareness through extensive postcards and flier distribution. At the markets, they welcomed market goers, introduced CalFresh use, and served as a bridge between low-resource Spanish and Mixteco-speaking community members and the market managers. The navigators also promoted National Farmers Market Week through the distribution of informational packets that contained EBT/Market Match information, recipes, fun activities for families, and resources. Navigators submitted a proclamation to the County Board of Supervisors declaring Farmers Market Week throughout the county through a resolution adoption.



“There was a customer who was showing other customers all the vegetables she had purchased with [Market Match]. She had the biggest smile as she showed her friends what she purchased with EBT & [Market Match]. Priceless. We also had a disgruntled customer who did not care for the [Market Match] initially as she wanted only cooked foods. With patience, kindness, and education she now comes and buys a few veggies and fruits with a grateful attitude.”

– Linda, Market Manager

Navigators experienced a substantial increase in farmers market traffic in a short time. Total CalFresh customers increased from 80 in 2021 to 212 in 2022 (165% change) and new CalFresh customers increased from 18 to 49 (172% change). The total amount of CalFresh and Market Match tokens redeemed at the two markets increased from \$2,109 in 2021 to \$5,722 in 2022 (171% change).

Recovering Through Nutrition: Nutrition Education an Integral Part of Rescue Mission Program

In December 2021, the CalFresh Healthy Living team at the County of San Diego's Health and Human Services Agency partnered with the San Diego Rescue Mission to offer a hands-on nutrition education course series for shelter residents in a recovery and job placement program. CalFresh Healthy Living Nutrition Specialists and trauma-informed nutrition education-trained Rescue Mission staff facilitated classes each week, with topics ranging from budget-friendly shopping and understanding food labels to building resilience and strengthening nourishment in our families and communities. All classes begin with a mindfulness exercise and end with a cooking demonstration and food tasting. Students are also encouraged to share their personal stories and experiences with food in a safe-space environment.

The participants became more comfortable participating in food preparation and group discussion as the course progressed. With each class, the residents of the one-year program expressed how attending the classes inspired them to recreate recipe ideas for their lunch or dinner. The CalFresh Healthy Living nutrition class series has now become a mandatory core class that one-year Rescue Mission residents must take for program completion.

"Thank you to the teachers as I quite enjoyed the class a lot. I loved learning now, about healthier recipes that don't take much effort but turn out delicious. This class made me more aware of what I put in my body and that eating healthier isn't always more expensive. Again, thank you all for this knowledge. I hope to bring some of what I learned into the next chapter of my life."

- Hannah M., class participant

Edible Garden at Senior Housing Site Increases Access to Fresh Vegetables

In partnership with Eskaton Frank Jaconetti Manor, a low-resource senior housing site in Colusa County, California Department of Aging Planning Service Area 3 (PSA3), CalFresh Healthy Living



staff created an accessible edible garden. The garden includes a raised garden bed and an Americans with Disabilities Act-compliant elevated self-watering garden planter box. Eskaton Frank Jaconetti Manor site maintenance staff installed a drip irrigation system for the raised garden bed, and soil for the garden bed was donated by a local landscaping company. Residents selected 15 types of vegetables and herbs to be planted and PSA3 provided the plant seedlings. Three weeks after planting, the garden was thriving with zucchini blossoms and jalapeno peppers, providing vegetables harvested by residents.

In September 2022, PSA3 CalFresh Healthy Living staff hosted a Garden Harvest Celebration event at Eskaton Frank Jaconetti Manor, which was attended by over one-third of the residents. PSA3 CalFresh Healthy Living staff provided recipe booklets and prepared tastings from three Supplemental Nutrition Assistance Program Education-approved recipes featuring items from the garden: “Summer Pasta Salad,” “Pico de Gallo,” and a “Cucumber Yogurt Dip,” served with a “Cucumber, Lime and Mint Water” recipe from Rethink Your Drink. During the event, PSA3 CalFresh Healthy Living staff began planning for a winter edible garden and gathered resident input regarding winter vegetables to be planted. The on-site edible garden improves access to fresh vegetables and herbs while also increasing opportunities for outdoor physical activity for low-resource seniors in Colusa County.

Cardozo Walking Groups Promote Health and Social Connection

In FFY 2022, a participant in a Catholic Charities of Stockton (CCST) physical activity workshop at Cardozo Middle School shared her desire to start walking again after she fell while walking alone. She was no longer comfortable walking alone, so CCST started a walking club with the workshop participants. The Walking Club participants worked together to create a schedule that fit everyone’s needs, enabling them to walk regularly and be more physically active. The social aspect of the club encouraged community participation and helped participants to feel more comfortable by walking in the safety of a group.



With the help of CCST, the Walking Club grew as more parents learned about the club and wanted to join, and a Champion of the Walking Club was identified to foster sustainability. The Walking Club is now being promoted to two local Zumba groups to create additional physical activity opportunities for all age groups. The Walking Club has resulted in a successful, active, and engaged group, thanks to the enthusiasm and initiative of its members and support from CCST staff.

"I was thinking of not coming but I remembered I was not going to be alone and that gave me the strength I needed."

Fostering Youth Cultural Knowledge Through Garden-Based Learning



The Foothill Indian Education Alliance invited the UCCE to develop a garden reinvigoration project to incorporate indigenous growing techniques with culturally relevant crops that enhance biodiversity. CalFresh Healthy Living, UCCE provided materials, including tomato and pepper plants by the Master Gardeners of El Dorado County. The garden now produces pollinator crops and over 20 food crops that are regularly distributed to families. Foothill Indian Education Alliance's garden coordinator has Yaqui, Popago, and Navajo ancestral roots and is a professional naturalist with many years of experience working with indigenous communities in the region.

UCCE, in collaboration with the Foothill Indian Education Alliance, provided garden-based nutrition education, cooking lessons, and indigenous cultural art and history lessons to local indigenous youth with varied tribal affiliations including Miwok, Maidu, Cherokee, and Apache. Students used the produce they grew in the garden to cook recipes from their culture using the Leah's Pantry cookbook, *Young, Indigenous, and Healthy*. Some of the students' favorite recipes were the "Corn, Blueberry, & Wild Rice Salad," "Bison Wild Rice Burger," and "Chia of the Valley California Parfait" from CalFresh Healthy Living California Department of Social Services Recipe Cards. Students reported cooking and sharing these recipes with their families. The summer program created an opportunity for indigenous youth to continue garden-based learning and foster greater cultural connection.

Promotoras Lead Nutrition Education for the Nutrition Pantry Program

The Los Angeles County Department of Public Health partnered with the Los Angeles Regional Food Bank to implement the Nutrition Pantry Program in nine food pantries across Los Angeles County. In FFY 2022, the Los Angeles Regional Food Bank formed a new food pantry partnership with Central City Neighborhood Partners (CCNP) to train Promotoras (community health workers) in healthy food demos and nutrition education. The Promotoras have co-led 30 nutrition classes in Spanish using the Food Smarts curriculum and provided nutrition education to 140 participants. Participants have noted that they like to see one of their community members leading nutrition education. Participants also appreciate that the food demo recipes are aligned with what CCNP provides in the food pantry, so it is easy to make the lesson's recipe at home. Participants have reported that their families eat more vegetables and try new types of healthy foods, such as quinoa.

Promotoras are part-time employees of CCNP and are paid a stipend from CCNP. Because of this, nutrition education as part of the Nutrition Pantry Program will be sustained beyond current funding. Additionally, CCNP was recently awarded the Tony Collier Community Spirit Award for its work as a food pantry, cementing its commitment to both implementing the Nutrition Pantry Program and continuation of nutrition education services for many years to come.





Conclusion

During Federal Fiscal Year (FFY) 2022, CalFresh Healthy Living continued to support Californians eligible for CalFresh Healthy Living. Adults and children participating in Direct Education reported significant improvements in many nutrition and physical activity behaviors. Policy, Systems, and Environmental change interventions, in partnership with communities, continued to improve access to opportunities for healthy eating and active living. Progress was made toward the Statewide Goals and Objectives for all objectives measured.

Planned Improvements to Reporting

State Implementing Agencies are aligning their Direct Education pre and post-surveys for adults so that physical activity results can be aggregated and representative of the program. Starting in FFY 2023, all State Implementing Agencies will administer an updated Food Behavior Checklist with physical activity questions to all adult Direct Education participants in nutrition and physical activity classes that are at least four sessions and at least four weeks long.



Looking Ahead

In FFY 2023, CalFresh Healthy Living will continue to reflect all federal priority areas in its programming, with an emphasis on racial equity in response to the state needs assessment results. CalFresh Healthy Living will also plan for its next three-year funding cycle (FFY 2024 – 2026) by finalizing its state-level goals and objectives as well as its next three-year Integrated Work Plan. CalFresh Healthy Living will continue to build upon its successes with improvements planned in the years ahead to better serve the most vulnerable populations and communities in California.



References

1. Cohen, J. (1988). *Statistical Power Analysis for the Behavioral Sciences*. New York, NY: Routledge Academic.
2. Molitor, F., Doerr, C. (2021). Diet Quality Differs by Race/Ethnicity Among Mothers and Their Children from Supplemental Nutrition Assistance Program–Education Households. *Health Equity*, 5.1, 633-636. DOI: [10.1089/heap.2021.0007](https://doi.org/10.1089/heap.2021.0007).
3. Molitor, F., Sugerman, S. B., & Sciortino, S. (2016). Fruit and Vegetable, Fat, and Sugar-Sweetened Beverage Intake Among Low-Income Mothers Living in Neighborhoods With Supplemental Nutrition Assistance Program–Education. *Journal of Nutrition Education and Behavior*, 48(10), 683-690.
4. UCLA Center for Health Policy Research (2021) Federal poverty level – continuous (0%–185%, all incomes). California Health Interview Survey (data file). <https://healthpolicy.ucla.edu/chis/Pages/default.aspx> (accessed December 2022).
5. U.S. Census Bureau. (2021). ACS 1-Year Estimates Public Use Microdata Sample 2021. Retrieved from https://www.census.gov/data/developers/data-sets/census-microdata-api/ACS_1-Year_PUMS.html.
6. United States Department of Agriculture, Food and Nutrition Services. (2016). The Supplemental Nutrition Assistance Program Education (SNAP-Ed) Evaluation Framework: Nutrition, physical activity, and obesity prevention indicators: Interpretive Guide to the SNAP-Ed Evaluation Framework. Retrieved from <https://snapedtoolkit.org/framework/index/>.
7. United States Department of Health and Human Services. (2018). Physical Activity Guidelines for Americans Second Edition. Retrieved from https://health.gov/sites/default/files/2019-09/Physical_Activity_Guidelines_2nd_edition.pdf.
8. United States Department of Health and Human Services and United States Department of Agriculture. (2020). Dietary Guidelines for Americans 2020-2025. Retrieved from https://www.dietaryguidelines.gov/sites/default/files/2020-12/Dietary_Guidelines_for_Americans_2020-2025.pdf.



Appendices

Appendices to the California SNAP-Ed Federal Fiscal Year 2022 Annual Report are available by request. To obtain copies of the appendices please contact CalFreshHealthyLiving@dss.ca.gov.

- A. Administrative Expenditures – SNAP-Ed Annual Report Template 7A
- B. Inventory of Awards Publications
- C. State Implementing Agencies Awards and Publications
- D. Major Achievements
- E. Major Setbacks
- F. New and Ongoing Projects for CA in FFY 2022
- G. Outcome and Impact Evaluations – SNAP-Ed Annual Report Template 7B
- H. Reporting SNAP-Ed Indicators – CalFresh Healthy Living Annual Report Template C
- I. State Implementing Agency Narrative Annual Reports – SNAP-Ed Annual Report Template 7A