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Federal Fiscal Year 2015 Supplemental Nutrition Assistance Program Education (SNAP-Ed) Annual Report

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Part 1, Section A: SNAP-Ed Narrative Annual Report

1. SNAP-Ed Program Overview

a. Progress in achieving overarching goal(s):

By September 30, 2015, develop and conduct two effective social marketing campaigns to promote common behavior change nutrition messages targeting SNAP eligible individuals with an annual reach of at least 50 million indirect nutrition education contacts/media impressions.

The AzNN ran expanded campaigns in FFY2015 as a continuation of the Simple Goodness concept. See campaign recaps below. Sample materials can be found in Appendix A.

	Vegetables & Fruits	Healthy Eating
Media Mix	English and Spanish – Out of Home, Radio, Online	English and Spanish – Out of Home, TV, Radio, Online
Ad Campaign Timing	2/23/15 – 5/17/15	6/1/15 – 9/27/15
Media Budget	\$574,494.12	\$900,266.33
Impressions	113,580,370	115,943,363
CPM (cost per thousand)	\$5.06	\$7.76

The eatwellbewell.org visitors are increasingly accessing the website through mobile devices, particularly the participants who speak Spanish. This led to the AzNN optimizing the site in FFY2015 to accommodate this shift. The AzNN hopes to see a decrease in bounce rate from the Spanish site after this update. Paid digital campaigns accounted for the majority of site traffic, however there was a significant increase in direct and organic search traffic as out of home, radio, and TV were run.

By September 30, 2015 support at least 60,000 community-based nutrition education activities with interactive games, costumed characters, and public events or festivals. Community events continue to be a large part of the AzNN program as they are a great way to reach the SNAP-Ed audience and build community partnerships. Throughout FFY2015, the AzNN participated in 535 activities/events and reached 75,276 people.

By September 30, 2015, provide at least 2,500,000 nutrition education print materials for SNAP eligible individuals throughout Arizona.

The AzNN shipped nearly one million items through the eatwellbewell.org ordering system to local agencies to be distributed within their communities. This number does not reflect items purchased and distributed by local agencies and does not match EARS which is still being compiled. While materials absolutely need to be tailored to the communities they serve, the AzNN continues to strive to improve consistency across materials used statewide.

Strengthen the statewide public health system and maximize effectiveness by providing skill-building training to at least 400 individuals per year.

The AzNN provided more trainings than ever in FFY2015, reaching 748 individuals. In addition to the standard Policies and Procedures training and Contractor Meeting, the AzNN provided curriculum training and immense support around PSE implementation. It is important to note the AzNN Contractors Meeting had a higher attendance rate than any contractor meeting in recent years. The AzNN learned in FFY2014 that local agencies needed increased support around PSE implementation. Through a contract with ChangeLab Solutions in FFY2015, the AzNN provided a webinar series as well as two in-person workshops focused on PSE implementation ranging from healthy retail to active living. Topics were selected after assessing staff capacity at ADHS as well as looking at the future direction of the AzNN beginning in FFY2016 with the new local agency scope of work. Overall the trainings were well received and have positioned the AzNN to be better prepared for implementation. The AzNN continue to include collaborative programs such as Healthy Arizona Policy Initiative (HAPI), Empower Programs, and Arizona Department of Education (ADE) Health and Nutrition Services as appropriate.

b. Number of new projects implemented during the reporting year by primary approach (Direct, Indirect, Social Marketing, or PSE):

The AzNN had no new contractors begin in FFY2015. However, the AzNN rolled out a strategy list for FFY2015 including 52 new Direct Education/PSE strategies for local agencies to implement. Local agencies could choose which strategies best fit their communities. See Appendix B for the strategy matrix by contractor.

c. Number of ongoing projects that were operational during the reporting year by primary approach (Direct, Indirect, Social Marketing, or PSE):

The AzNN funded 10 contracts in FFY2015 for a total of 28 funded partners (6 health departments, 10 Extensions, 10 subcontractors, 2 other partners). In all cases, direct and indirect interventions were provided and PSE strategies were beginning to be implemented. The State AzNN office coordinates the social marketing initiatives within Arizona.

d. Major achievements (not already addressed):

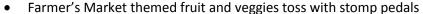
A large portion of the year was spent preparing for and reviewing responses from the FFY2016 Request for Grant Applications (RFGA) for SNAP-Ed Local Agency Implementation. The revised scope of work integrated recommendations from the community advisory process completed in FFY2014 including: revised list of strategies (reduced from 52 to 16), revised funding formula ensuring adequate funding levels for all AZ counties, revised curricula list meeting USDA evidence-based requirements, emphasis on comprehensive/coordinated approach of direct and PSE, and financial incentive for providing services to the Native American population. Additionally, the RFGA required 3-year work plans. Through this process, the AzNN awarded at

least one agency in each of Arizona's 15 counties to implement the SNAP-Ed program. Some of these counties have never received direct support for SNAP-Ed implementation.

Along with the release of the RFGA, the AzNN compiled an Obesity Prevention Resource Guide to support SNAP-Ed implementation statewide. The Resource Guide contains all approved strategies, curricula, and resources to support direct education and PSE efforts. Local agencies are limited to items found within the Resource Guide. While the document is extensive, it is not all inclusive. Local Agencies may request additional items be added as needed. All items within the Resource Guide meet the evidence based requirement outlined in the SNAP-Ed Federal Guidance. Many of the items found within the Resource Guide were highlighted in trainings or workshops throughout the year. While local agencies prefer to have free reign over the resources they use, they have expressed appreciation for the completeness and flexibility found within the Resource Guide. The AzNN Obesity Prevention Resource Guide will be updated annually.

To support the shift to greater PSE implementation, the AzNN invested in revamping the eatwellbewell.org local agency section — now known as the collaborator section. Previously, the website was built around the traditional direct education the AzNN has been known for, but lacked adequate information and space/design to support PSE implementation. The website is now organized by the new focus areas outlined in the FFY2016 scope of work (Food Systems, Active Living, School Health, Early Childhood, and Direct Education) and includes approved strategies, news/highlights, resources, key contacts, and trainings. Additionally, the training section has been enhanced to include the LMS courses developed in FFY2015, webinar recordings, materials from contractor meetings, and a place to support the new subcommittees. Finally, overall reorganization makes this section easier to navigate. Portions of the collaborator section will continue to be updated throughout FFY2016, but the overall framework is a great step forward.

Community events continue to be a large part of the AzNN program. After the retirement of the AzNN character costumes, the contractors expressed interest in additional games/inflatables, perhaps smaller in scale, to use at events in place of the character costumes. The AzNN created two sets of three new games and an additional set of the existing inflatables (skeet ball and ball toss). The new games include:





 Vegetable and Fruit Guess Who, a nutrition themed play on the traditional Hasbro game





Velcro MyPlate, an interactive table top or large game around the food groups



The new games rolled out with the start of the school year (4th quarter FFY2015), but due to accounting issues listed below in setbacks, they were not available to contractors until the end of the fiscal year.

The AzNN continued the collaboration with the Arizona Department of Education (ADE) Health and Nutrition Services team on multiple projects. This included continuation of training and materials in support of the Fresh Fruit and Vegetable Program (FFVP) and the Farm 2School Healthy Harvest pilot project as well as a new collaboration called the Nutrition Education Action Team (NEAT). The NEAT project aims to improve nutrition integration in the classroom by preparing Arizona to adopt standards around nutrition education. NEAT will initially develop a framework, similar to Let's Move Active Schools, that focuses on utilizing existing resources with a long term goal of statewide standards. NEAT is a partnership with ADE, AzNN, Arizona Dairy Council, a few local nonprofit organizations, as well as district food service directors. Progress slowed near 3rd quarter after the ADE representative retired, but the group will reconvene in FFY2016.

e. Major setbacks, if any:

The AzNN continued to suffer from high vacancy rates after a statewide hiring freeze was instituted in the 1st quarter. Reorganization within the Bureau late in the 4th quarter brought some much needed help to the team; however most positions will not fully transition to

supporting AzNN until FFY2016. The AzNN endured a 40-50% vacancy rate the entire fiscal year with many of those vacancies being key positions.

Additionally, the State of Arizona transitioned to a new financial system with the beginning of state FY16 (4th quarter FFY2015). This led to an eight week delay in issuing purchase orders which resulted in many postponed trainings and delays in projects. All projects affected by this delay will be wrapped up within the first quarter of FFY2016.

f. Overall assessment:

Although many barriers from FFY2014 carried into FFY2015, the AzNN feels this was a successful year overall. The AzNN invested substantial time into the development of the new scope of work for FFY2016 which includes a multi-year plan and more focused approach to PSE implementation. The adoption of a multi-year plan has encouraged local agencies to think long-term with their program design while ensuring much needed stability with the scope of work and program direction from the state AzNN team.

Additionally, the increased focus on capacity building of local agencies throughout FFY2015 has put the AzNN in an improved position for FFY2016. This was reflected in the FFY2016-2018 Nutrition Education and Obesity Prevention Plan as local agencies identified specific interventions and activities in their work plans.

The AzNN maintained collaborative relationships throughout FFY2015, but will need to dedicate even more time in FFY2016 to improving relationships and/or developing new partnerships with an increased focus on the collective impact model. The improved stability of the program will be an asset as these relationships develop and/or grow.

2. SNAP-Ed Administrative Expenditures

Administrative Expenses	FFY2014 Carry-In Funds	% Total Admin Expenses	FFY2015 Funds	% Total Admin Expenses
Administrative Salary	\$140,304.89	58.48%	\$808,486.24	78.33%
Administrative Training Functions	\$0	0%	\$0	0%
Reporting Costs (% EARS) (1)	N/A	N/A	N/A	N/A
Equipment/Office Supplies	\$12,540.20	5.23%	\$31,573.61	3.06%
Operating Costs	\$57,950.39	24.15%	\$43,020.02	4.17%
Indirect Costs	\$29,122.94	12.14%	\$149,095.21	14.44%
Overhead Charges (2)	N/A	N/A	N/A	N/A
TOTAL ADMIN EXPENSES	\$239,918.42		\$1,032,175.08	

Fiscal tracking at the State level is not completed in this manner. The amounts shown above are estimates based on current expenditures as reflected in the ADHS accounting system. Due to differences in fiscal tracking, total amounts reflected will not match question 10 in final EARS reporting.

(2) Overhead charges are covered by the agency's indirect costs and cannot be separated out.

3. SNAP-Ed Evaluation

a. SNAP-Ed Evaluation Reports Completed for this Reporting Year:

The AzNN updated and re-administered the <u>Target Population Survey</u> originally completed in FFY2013. The findings will be used to inform program direction, social marketing messages, and to meet the WRO priority indicators. Intercept interviews were completed with nearly 1,200 women aged 18-49, with children, and eligible for SNAP-Ed. Interviews were conducted at a variety of sites in four key markets (Phoenix, Tucson, Flagstaff, and Yuma) as well as outlying areas (Prescott, Prescott Valley, Cottonwood, Casa Grande, and Coolidge). The full report can be found in Appendix C.

- The women interviewed reported eating a meal at home 13.6 times a week, averaging almost two meals a day at home. This is an increase over the 2012 figure of 8.3 times/week. The average number of times per week families eat together is 9.5 times/week, higher than in 2012 (7.7).
- Six in ten (62%) SNAP eligible women said that in the past 12 months they often or sometimes worried about running out of food before they got money to buy more. Half (51%) of the women said in the past 12 months the food they bought often or sometimes didn't last and they didn't have money to get more.
- Women also reported eating more vegetables compared to 2012. The median number
 of servings of vegetables and beans increased from 1.9 to 3.3 servings per day. Similarly,
 there was an increase in women who reported eating at least three servings of
 vegetables per day 18% to 47%.
- Among women who drink milk, there was an increase in the percentage of women drinking non-fat or 1% milk (from 25% to 31%).
- The vast majority of the women interviewed purchase most of their fruits and vegetables, dairy, and meat/chicken/fish at traditional grocery stores (94%+).
- Among health-related shopping behaviors, choosing foods with less added sugar was the health-related behavior practiced by the greatest percentage of women (54%). Four in ten women maintain they always/often read labels for nutrition facts (41%) or ingredient lists (40%).
- One in five women used a food cooperative in the past 12 months (20%), increasing from just 4% last wave. Participation in the Summer Food Service Program declined dramatically, from 26% in 2012 to 7% this year.
- Almost nine in ten women (88%) said they have participated in moderate activities for at least 10 minutes at a time in the past week. This is an increase from 69% in 2012. Almost

⁽¹⁾ The AzNN does not track costs associated with reporting (i.e., EARS) separately. The staff time spent on EARS is reported along with all other administrative salary costs. The AzNN has worked to streamline the data collection/analysis process and estimates it takes approximately 150 hours annually to prepare the reporting forms, transfer data to the database, run the analysis, etc. The majority of time spent on EARS is at the local agency level with their data collection and data entry, which is not included in the 150 hours.

- half (48%) reported participating in vigorous activities during that same period, increasing from 34% in 2012.
- One in ten reported no physical activity in the past week, declining from 27% in 2012.
- Among study participants who provided height and weight information, one in four (26%) is considered normal weight, 30% are considered overweight, and 42% are considered obese. Compared to 2012, there are fewer overweight women, and more obese women.

The completed **WRO Indicators Report** can be found in Appendix D.

In FFY2008-2011, the AzNN completed an annual <u>Partner Satisfaction Survey</u>. The State AzNN team felt it was time to re-administer this survey and begin setting benchmarks around these measures. The program has been in flux through years 2012-2014 due to drastic program changes and changes in program leadership. The FFY2015 survey results will be used as baseline for future years. The full report can be found in Appendix E.

- Nearly half (48%) of respondents have been with AzNN for five or more years
- Majority (86%) are satisfied or very satisfied with the AzNN overall
- Half (54%) felt the program stayed the same from FFY2014 to FFY2015 and nearly half (42%) felt the program improved
- Strengths include: competence of staff, planning process used, contractor meetings, trainings, content in e-newsletter, campaign material appropriateness/design
- Areas of improvement include: clarity and continuity of technical assistance, ADHS staff responsiveness and availability, material availability, subcommittee communications between members.

The AzNN collected pre- and post-surveys from both adults and youth throughout FY2015 per the FFY2015 AzNN Evaluation Framework. However, the ADHS Scan Tron machine broke mid-year and data entry/analysis was still being complete upon the submission of this report. An addendum will be submitted once entry and analysis is complete.

b. Impact Evaluation:

The AzNN did not complete a state level Impact Evaluation in FFY2015. The AzNN Evaluation Framework revised in FFY2015 for implementation in FFY2016 includes an Impact Evaluation.

4. SNAP-Ed Planned Improvements

As mentioned previously, the AzNN issued a new scope of work for local implementation in FFY2016. The new scope of work will provide the local agencies with a greater focus and more specific direction.

While the AzNN Obesity Prevention Resource Guide is a great tool for the local agencies, the AzNN has received some feedback that the Resource Guide is extensive and a bit overwhelming. Many of the strategies selected in FFY2016 encompass multiple interventions or models. Some interventions or models may support multiple strategies. Throughout FFY2016, the AzNN will convert the Resource Guide to a searchable repository available on the eatwellbewell.org

website. We will maintain the Resource Guide in its original form, but will also uploaded and tag documents so local agencies may search the repository in any fashion.

The AzNN will be starting new subcommittees in FFY2016 around each of the Focus Areas outlined in the new scope of work. The committees will be led by one AzNN staff member and one local agency staff member. Each committee will establish their own set of objectives, but overall the committees will be used to increase collaboration and sharing between local agencies and to identify training and technical assistance needs. Subcommittees will be assessed near the end of FFY2016 and modified as necessary.

Throughout FFY2015, it became apparent ADHS did not have the capacity to support the AzNN evaluation and the hiring freeze exasperated the issue. The AzNN decided to contract out all evaluation services with support and guidance from the ADHS evaluation team. This will provide AzNN the support it needs while still ensuring consistency within Bureau wide evaluation efforts. Beginning in FFY2016, the AzNN will contract with the University of Arizona College of Agriculture and Life Sciences to evaluate SNAP-Ed implementation across all local agencies. Evaluation of social marketing activities will continue to be handled by the ADHS staff, but with consultation of the UA Evaluation team. The UA Evaluation team will maintain the AzNN Evaluation Framework, provide training and technical assistance to local agencies, take over the AzNN Evaluation Subcommittee, collect and analyze all indicators within the evaluation framework, and conduct an impact evaluation. The AzNN is excited to increase capacity around evaluation which will leave to better implementation of the SNAP-Ed program.

The AzNN will continue to host webinars and workshops throughout FFY2016, however the training topics will expand beyond PSE implementation. The AzNN plans to provide more general trainings, rather than trainings focused on a particular focus area. Topics such has framing the message or health literacy will translate to all SNAP-Ed activities and give local agency staff the necessary skills to improve their program implementation. Additional trainings will help to enhance evaluation efforts statewide. PSE focus training needs will be identified through subcommittees.

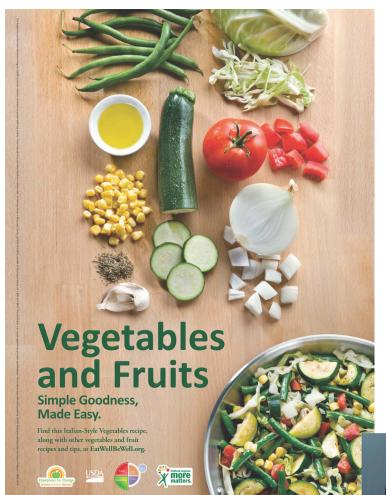
5. EARS Feedback

The AzNN has no additional comments on EARS. We look forward to learning more about the revised EARS form so we may begin planning for implementation.

Appendix A FFY2015 Social Marketing Campaigns



Arizona Nutrition Network FFY 2015 Campaigns



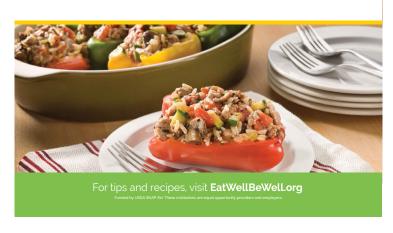


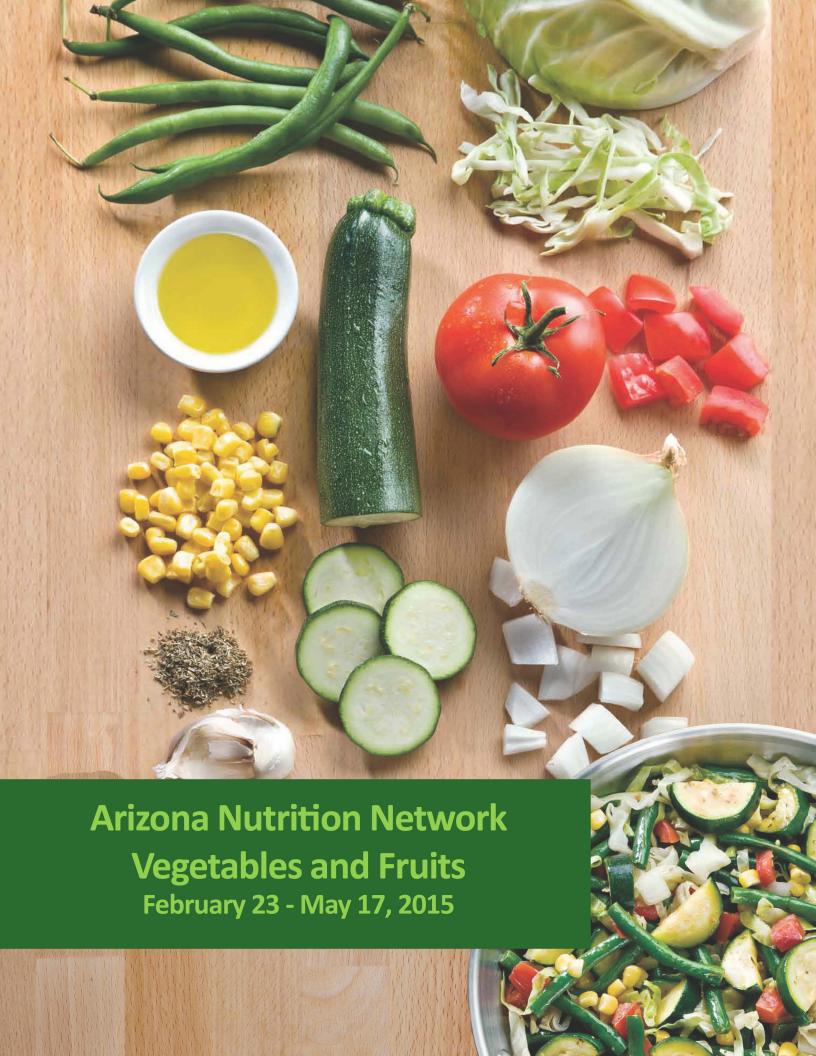




Champions for Change

Mealtime is Family Time



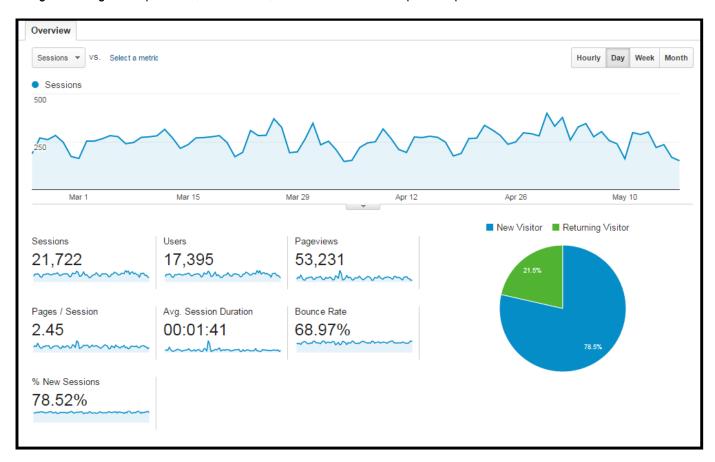


WEBSITE PERFORMANCE

Vegetables and Fruits Campaign (2/23-5/17/2015)

EATWELLBEWELL.ORG

The charts below show the overall performance of eatwellbewell.org during the Vegetables and Fruits campaign. Out of the 21,722 visits to the site in the three month campaign window, **78.52% of those sessions were new sessions**. A high showing of unique visits, in this case, is a clear indication of positive performance.



DEFINITIONS

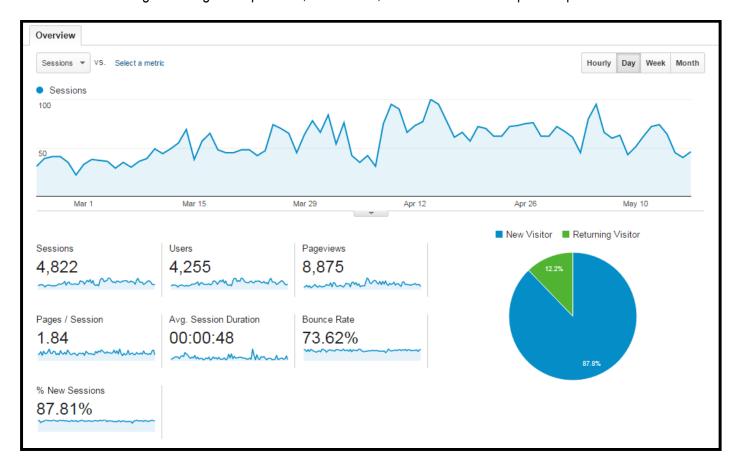
Sessions:	Total # of Sessions within the date range. A session is the period of time a user is actively engaged with your website, app, etc.
Users:	Users that have had at least one session within the selected date range. Includes both new and returning visitors
Pageviews:	Total # of pages viewed. Repeated views of a single page are not counted.
Pages/Session:	Average # of pages viewed during a session. Repeated views of a single page are not counted.
Average Session Duration:	The average length of a session.
Bounce Rate:	Percent of single page visits in which the person left the site from the entrance page without interacting.
% New Sessions:	An estimate of the percentage of first time visits.

WEBSITE PERFORMANCE

Vegetables and Fruits Campaign (2/23-5/17/2015)

COMESANOVIVEMEJOR.ORG

The charts below show the overall performance of comesanovivemejor.org during the Vegetables and Fruits campaign. Out of the 4,822 visits to the site in the two month campaign window, 87.81% of those sessions were **new sessions**. A high showing of unique visits, in this case, is a clear indication of positive performance.



DEFINITIONS

Sessions:	Total # of Sessions within the date range. A session is the period of time a user is actively engaged with your website, app, etc.
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% New Sessions:	An estimate of the percentage of first time visits.

Billboards and Posters

50 locations statewide (English and Spanish)























School Bus and Transit

26 Transit Shelters/ Nogales, Tucson (English and Spanish)
10 Bus Benches/ Nogales, Tucson (English and Spanish)
40 School Buses/ MUSD, PVUSD, PUSD (English and Spanish)



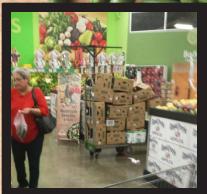








Specialty Out of Home Carnicerias, C-stores, Laundromats Statewide (English and Spanish)





























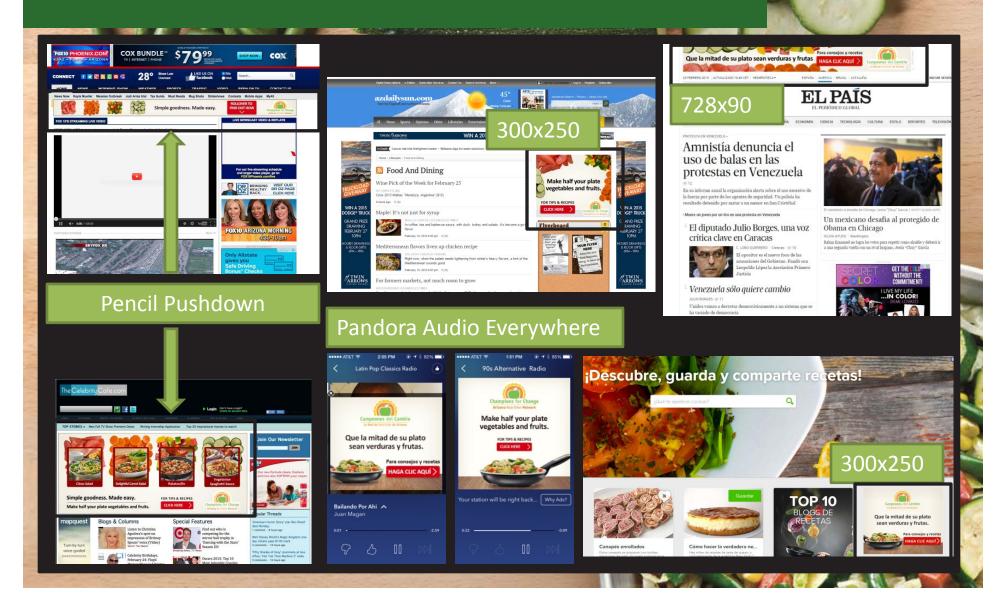




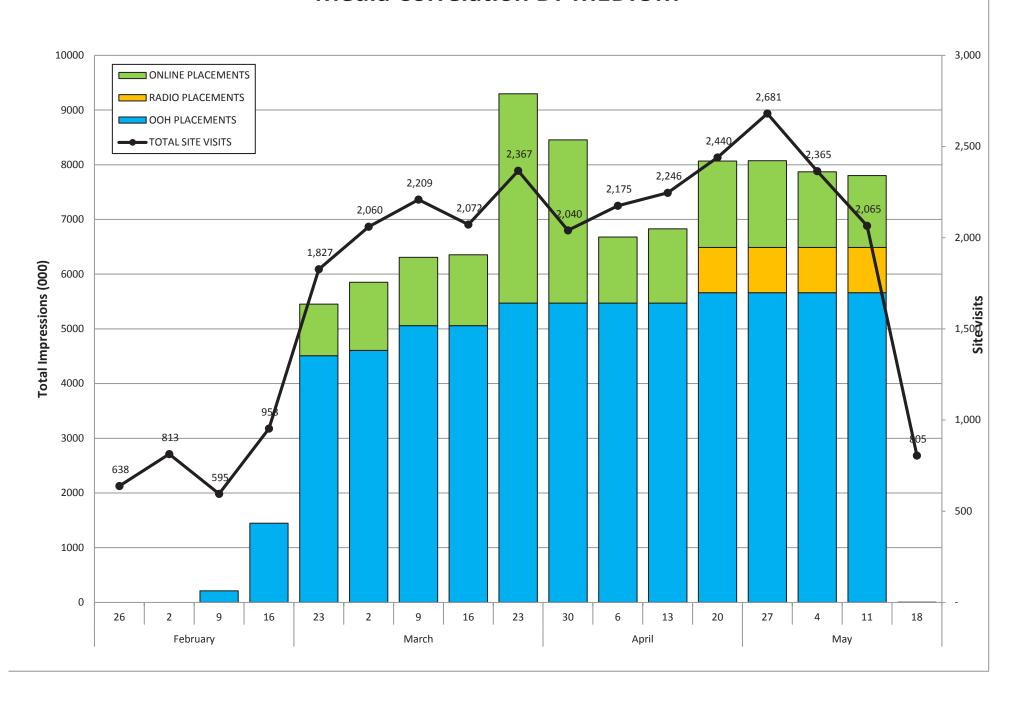




Online Statewide (English and Spanish)



Media Correlation BY MEDIUM





Champions for Change
Arizona Nutrition Network

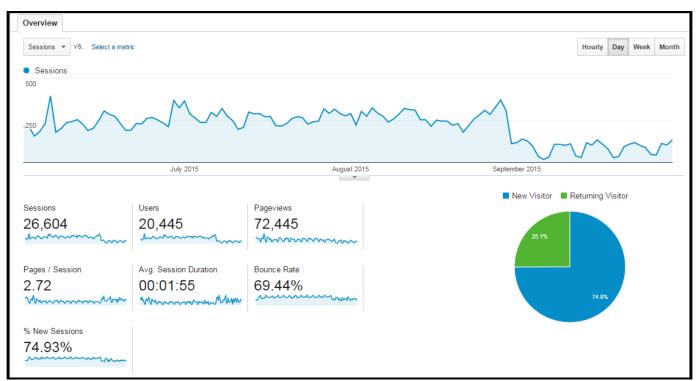
Mealtime is Family Time

June 1, 2015 - September 27, 20015



EATWELLBEWELL.ORG

The charts below show the overall performance of eatwellbewell.org during the Healthy Eating campaign. Out of the 26,604 visits to the site in the four month campaign window, 74.9% of those sessions were new sessions. This is a slight decrease from past campaigns indicating that we are increasing the number of repeat visits throughout the campaign.



DEFINITIONS

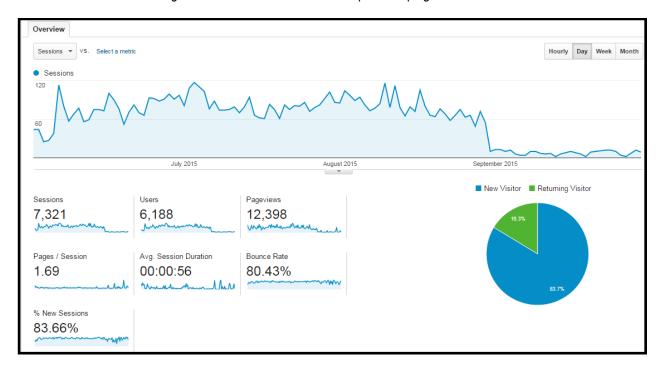
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% New Sessions:	An estimate of the percentage of first time visits.

WEBSITE PERFORMANCE

Vegetables and Fruits Campaign (6/1/15-9/30/15)

COMESANOVIVEMEJOR.ORG

The charts below show the overall performance of comesanovivemejor.org during the Healthy Eating campaign. Out of the 7,321 visits to the site in the four month campaign window, 83.7% of those sessions were new sessions. This is slightly lower than we have seen in past campaigns and an indication that we are creating repeat visitors to the site. There was also a significant increase in sessions from past campaigns.



DEFINITIONS

Sessions:	Total # of Sessions within the date range. A session is the period of time a user is actively engaged with your website, app, etc.
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% New Sessions:	An estimate of the percentage of first time visits.

Billboards/Transit Shelters/ School Bus













Grocery Stores/ Laudromats











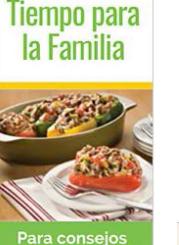






Standard Banners/ Pandora





y recetas

haga clic aqui



La Hora de la Comida es Tiempo para la Familia

Para consejos y recetas

haga clic aquí





La Hora de la Comida es Tiempo para la Familia



Mealtime is Family Time



For tips and recipes

click here



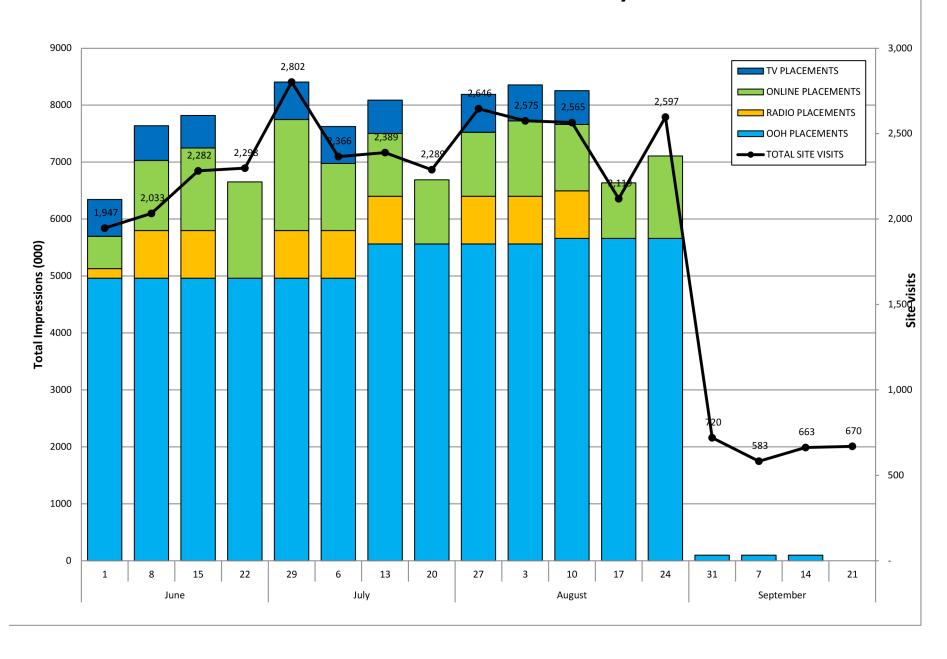
Mealtime is Family Time

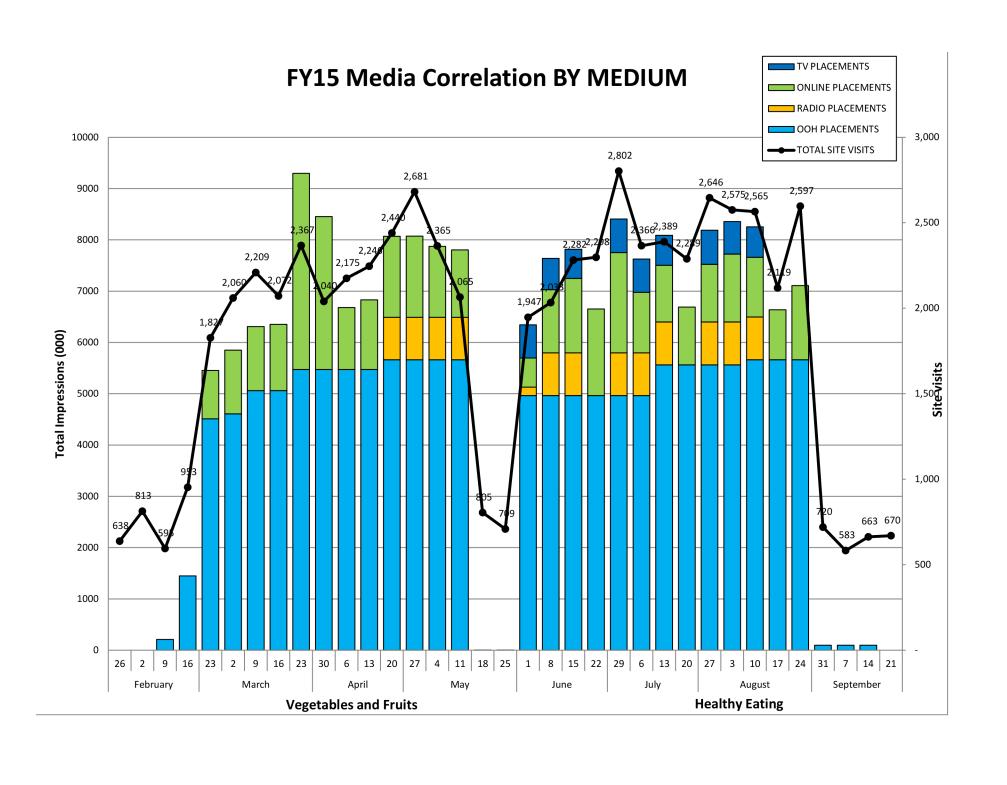
Arizona Nutrition Network





HEALTHY EATING - Media Correlation by Medium





Appendix B FFY2015 Contractor Strategy Matrix



FY15 Contractor Strategies

							opa								Cruz			
Stra	tegy	UA Apache	UA Cochise	Coconino	UA Gila	UA La Paz	UofA Maricopa	Maricopa	UA Mohave	Mohave	UA Navajo	Navajo	UA Pima	UA Pinal	UA Santa C	TUSD	Yavapai	Yuma
	Live																	
1.01	Provide healthy eating and active living education in collaboration with DES sites, public housing sites, or other public health service sites	X	-	Х	Х	Х	х	Х	Х	X	Х	Х	Х	Х	Х	-	Х	Х
1.02	Encourage the development and adoption of healthy eating food and beverage and active living household policies and child-feeding practices consistent with Empower Home Visiting standards	-	X	-	-	-	Х	-	-	-	Х	Х	X	-	-	-	-	-
1.03	Support the development, implementation, and evaluation of healthy eating and active living policies/standards for community venues	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
1.04	Encourage use of farmers' market with SNAP and WIC access at key community outlets	-	-	X	-	-	х	X	-	-	-	-	Х	Х	Х	-	Х	-
1.05	Encourage participation in community and home gardens	X	-	Х	Х	Х	Х	X	Х	-	Х	Х	Х	Х	-	-	Х	Х
1.06	REMOVED per USDA WRO	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
1.07	Support family-friendly cooking demonstrations and taste-testings throughout low-income residential communities	Х	-	-	-	-	Х	Х	-	Х	-	Х	Х	-	-	-	-	Х
1.08	Increase availability of healthy food retail, including mobile vendors, farmers' markets, corner/country stores, and grocery stores in low-income residential communities	-	-	Х	Х	Х	х	Х	-	-	Х	Х	-	Х	-	-	-	Х
1.09	Provide technical assistance to support the implementation of federal menu labeling regulations (e.g. posting calories)	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
1.10	Support structured family-friendly physical activity opportunities throughout the year, throughout the community	Х	-	Х	Х	Х	х	Х	-	Х	Х	Х	Х	Х	-	-	Х	-
1.11	Assess current active living and healthy eating policies (such as sidewalks, commercial buildings, bike lanes, shared- use paths, greenways and recreational facilities policies) at the community level and provide recommendations to key stakeholders	-	-	-	-	-	-	Х	-	-	-	-	-	-	-	-	х	-
1.12	Build capacity to implement active living policy (such as sidewalks, commercial buildings, bike lanes, shard use paths, greenways and recreational facilities policies) at the community level and by community organizations	-	-	-	-	-	-	Х	-	-	Х	-	-	Х	-	-	Х	-

Stra	tegy	UA Apache	UA Cochise	Coconino	UA Gila	UA La Paz	UofA Maricopa	Maricopa	UA Mohave	Mohave	UA Navajo	Navajo	UA Pima	UA Pinal	UA Santa Cruz	TUSD	Yavapai	Yuma
1.13	Encourage drinking water access and limitation of sugar-sweetened beverages (SSB)	-	-	-	Х	Х	-	Х	-	-	Х	Х	-	Х	-	-	-	-
1.14	Collaborate with hospitals to support breastfeeding policies consistent with Arizona Baby Steps to Breastfeeding Success or Baby-Friendly USA (BFHI)	-	-	-	-	-	-	Х	-	-	-	-	-	-	-	-	-	-
	Learn																	
2.01	ECE/Child Care: Provide parent education through the setting	Х	-	Х	Х	-	Х	Х	-	Х	Х	X	X	X	X	Х	-	Х
2.02	Kindergarten – High School: Provide education on healthy eating and active living to staff and students in the classroom setting	Х	-	Х	Х	Х	Х	Х	Х	Х	Х	Х	Х	Х	Х	Х	Х	Х
2.03	ECE/Child Care: Support breastfeeding in child care consistent with ADHS breastfeeding-friendly child care centers and homes initiative	Х	Х	-	-	-	-	Х	-	-	-	-	-	-	-	-	-	-
2.04	ECE/Child Care: Support development, implementation, and evaluation of food and beverage policies for child care settings consistent with the Empower standards	Х	-	-	-	-	-	Х	-	-	Х	-	Х	-	-	Х	-	-
2.05	ECE/Child Care: Improve capacity of child care providers and food service staff in nutrition education and healthy meal planning, family-style meal service and food preparation	-	Х	-	Х	-	Х	Х	-	х	-	-	Х	Х	-	Х	-	-
2.06	ECE/Child Care: Support development, implementation, and evaluation of child care gardens	-	-	Х	-	-	Х	Х	-	-	Х	Х	Х	Х	-	-	-	Х
2.07	ECE/Child Care: Start and expand Farm to Child Care programs	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
2.08	ECE/Child Care: Establish strong child care wellness programs and policies consistent with Empower, including the development of child care wellness councils	-	-	-	Х	-	Х	Х	-	-	-	-	-	Х	-	Х	-	-
2.09	ECE/Child Care: Support development, implementation, and evaluation of physical activity policies and environments that meet Empower Physical Activity Standards	-	-	-	Х	-	Х	-	-	х	-	-	-	Х	-	Х	-	-
2.10	ECE/Child Care: Improve capacity of child care providers to provide children with opportunities for physical activity throughout the day, including teacher-led and free play opportunities consistent with Empower	-	-	-	х	-	Х	-	-	-	-	-	-	Х	-	Х	-	-
2.11	Kindergarten – High School: Support the development, implementation, and evaluation of nutrition and physical activity Local Wellness Policies in collaboration with Local Education Agencies (LEAs)	Х	Х	Х	Х	Х	Х	Х	-	Х	Х	Х	Х	Х	Х	Х	Х	Х
2.12	Kindergarten – High School: Support development, implementation, and evaluation of cafeteria point of purchase prompts	-	-	-	-	-	-	-	-	х	-	-	-	-	-	Х	-	-
																		$\overline{}$

		Apache	Cochise	Coconino	Gila	La Paz	UofA Maricopa	Maricopa	UA Mohave	Mohave	UA Navajo	Navajo	Pima	Pinal	Santa Cruz	Ω	Yavapai	Ja
Stra	tegy	Y A	A	S	Ă	¥ A	Uof	Mar	A	Mo	A	Nav	M	M	A N	TUSD	Yav	Yuma
2.13	Kindergarten – High School: Support development, implementation, and evaluation of cafeteria design supporting healthier food purchasing and consumption	-	-	-	-	-	-	Х	-	Х	-	-	-	-	-	Х	-	-
2.14	Kindergarten – High School: Support development, implementation, and evaluation healthy school vending policies	-	-	-	-	-	-	-	-	Х	-	-	-	-	-	Х	-	-
2.15	Kindergarten – High School: Encourage drinking water access and limitation of sugar-sweetened beverages (SSB)	-	-	-	Х	Х	Х	-	-	X	X	-	Х	Х	-	Х	X	-
2.16	Kindergarten – High School: Limit advertisements of less healthy foods and beverages	-	-	-	-	-	-	-	-	Х	-	-	-	Х	-	Х	Х	-
2.17	Kindergarten – High School: Start and expand Farm to School programs increasing purchases and use of foods from local farms	-	-	-	-	-	х	Х	-	-	-	-	-	-	-	Х	Х	-
2.18	Kindergarten – High School: Improve student, teacher, and staff access to nutrition information through menu labeling and classroom curriculum to improve student understanding of nutrition information	Х	-	-	-	Х	х	Х	Х	Х	-	Х	Х	Х	-	Х	Х	-
2.19	Kindergarten – High School: Promote intersections between garden and classroom curriculum with creation of sustainable school gardens	-	-	-	-	-	х	Х	Х	Х	-	Х	Х	-	-	Х	Х	Х
2.20	Kindergarten – High School: Support development, implementation, and evaluation of physical activity policies that address the five components of comprehensive school physical activity programming	-	-	-	-	-	-	-	-	-	-	-	-	-	-	Х	Х	-
2.21	Kindergarten – High School: Support student participation in comprehensive school physical activity programming, including physical education, recess, walking and bicycling to school, and joint use agreements	-	-	Х	х	Х	х	Х	-	Х	-	Х	Х	Х	Х	Х	Х	-
	Work																	
3.01	Provide healthy eating and active living education in collaboration with worksites	Х	-	Х	-	-	Х	Х	Х	-	Х	-	X	X	X	X	-	Х
3.02	Establish incentive programs, such as flex time, rewarding and/or recognizing employee healthy behaviors	-	-	-	-	-	-	X	-	-	-	-	-	-	-	-	-	Χ
3.03	Encourage point-of-purchase prompts for healthy foods and beverages at area food retail outlets and food service institutions at/or near worksites	-	-	Х	-	-	-	-	-	-	-	-	-	-	-	-	-	-
3.04	Promote availability of healthy restaurants and food vendors at/or near worksites	-	-	-	х	х	-	-	-	-	-	-	-	Х	-	-	-	-
3.05	Provide technical assistance to support the implementation of federal menu labeling regulations (e.g. posting calories)	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-

Strategy		UA Apache	UA Cochise	Coconino	UA Gila	UA La Paz	UofA Maricopa	Maricopa	UA Mohave	Mohave	UA Navajo	Navajo	UA Pima	UA Pinal	UA Santa Cruz	TUSD	Yavapai	Yuma
3.06	Use point-of-decision prompts to encourage use of stairs	-	-	Х	-	-	-	Х	-	-	-	-	Χ	Х	-	-	-	-
	Promote participation in and use of area physical activity resources, including partnerships with parks and trails organizations	Х	-	Х	Х	х	-	Х	Х	-	Х	-	Х	Х	Х	-	-	-
3.08	Support access to and compliance with worksite breastfeeding accommodation policies	-	-	-	-	-	-	Х	-	-	-	-	-	-	-	-	-	-
	Play																	
4.01	Provide healthy eating and active living education in collaboration with community organizations	Х	-	х	х	х	Х	Х	х	х	Х	Х	Х	Х	Х	-	Х	Х
4.02	Support development, implementation, and evaluation of healthy eating and active living standards for community venues	-	-	-	-	-	-	Х	-	-	-	-	-	-	-	-	-	-
	Assess current active living and healthy eating policies (such as sidewalks, commercial buildings, bike lanes, shared- use paths, greenways and recreational facilities policies) at the community level and provide recommendations to key stakeholders	-	-	-	-	-	-	х	х	-	-	-	Х	-	-	-	Х	-
4.04	Build capacity to implement active living policy (such as sidewalks, commercial buildings, bike lanes, shared-use paths, greenways and recreational facilities policies) at the community level and by community organizations	-	-	-	-	-	-	Х	-	-	-	-	-	X	-	-	Х	-
4.05	Work with local coalitions and Food Policy councils to promote in healthy eating and active living	X	-	-	Х	Х	Х	-	-	-	Х	Х	Х	Х	-	-	Х	Х
4.06	Encourage point-of-purchase prompts for healthy foods and beverages at area food retail outlets and food service institutions (e.g., parks and municipal buildings)	-	-	х	-	-	-	-	-	-	-	X	-	-	-	-	-	-
4.07	Promote availability of healthy restaurants and food vendors	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
4.08	Encourage compliance with federal menu labeling regulations	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
4.09	Promote participation in and use of free area physical activity resources, including partnerships with parks and trails organizations, and other community organizations	Х	-	х	х	Х	Х	Х	-	Х	-	Х	Х	Х	Х	-	Х	-

Appendix C Target Population Survey



Arizona Department of Health Services (ADHS) / Arizona Nutrition Network (AzNN)

2015 Target Population Research Report





Report Prepared for: Arizona Department of Health Services / AzNN

Revised: November 10, 2015



3033 North 44th Street Phoenix, AZ 85020 Phone: 602.707.0050

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- B. Questionnaire
- C. Data Tables

I. Background & Methodology

Background

As ADHS' Bureau of Nutrition and Physical Activity continues to attract eligible households to the SNAP program, it is critical that messaging regarding the program be relevant to the target audience. This requires a deeper understanding of the food shopping and preparation habits as well as the physical activity levels of this population. In addition, awareness and use of available assistance programs and their experiences with these programs is important as ADHS continues to fine-tune their outreach efforts.

Respondent Qualifications

- SNAP eligible women (185% of federal poverty guidelines)
- Must have at least one child 2-11 years of age
- Between 18 and 49 years of age
- Mix of ethnicities
- Mix of experience with various assistance programs

Study Objectives

The overall objective of this research was to gain a deeper understanding of SNAPeligible households. Specific study objectives included obtaining information in the following areas:

- Frequency of eating meals at home, at fast food and other restaurants.
- Consumption of specific foods, expressed as servings per day.
- Grocery shopping preferences and behavior.
- Participation in physical activity.
- Participation in assistance programs such as WIC, SNAP, CSFP, Summer Food Program, School Lunch/School Breakfast, and FDPIR (Food Distribution Program on Indian Reservations).
- Reasons for not participating in SNAP and / or WIC.

Methodology

Intercept interviews were conducted with 1196 women. Interviews were conducted at a wide variety of locations (e.g., DES offices, farmers markets, swap meets, community centers, county health centers, grocery stores) in four key markets: Phoenix, Tucson, Flagstaff, Yuma, as well as several outlying areas (e.g., Prescott, Prescott Valley, Cottonwood, Casa Grande, Coolidge). Participants had the option of completing the interview in English or Spanish. Each was given a \$10 gift card as a "thank you." All interviews were conducted between April 8 and May 31, 2015. The average interview length was 15 minutes.

Throughout this report results are compared to the previous benchmark study conducted between September 8 and November 12, 2012.

Respondent Profile

	Total n=1196	Phoenix n=301 (A)	Tucson n=304 (B)	N. AZ n=193 (C)	Yuma n=198 (D)	Other n=200 (E)
Age						
18 – 25	24%	22%	18%	24%	39% ^{ABCE}	23%
26 – 35	43%	35%	46% ^A	45% ^A	42%	50% ^A
36 – 45	27%	33% ^{DE}	29% ^D	29% ^D	15%	22%
46 – 49	7%	10% ^{CDE}	7%	3%	4%	5%
Race/Ethnicity						
Caucasian/White ¹	27%	16%	20%	29% ^{AB}	26% ^A	53% ^{ABCD}
Native American	9%	5% ^D	5% ^D	32% ^{ABDE}	2%	3%
African American	7%	16% ^{BCDE}	3%	3%	5%	5%
Asian	1%	1%	1%	1%	1%	1%
Multi-Racial/Other	54%	60% ^{CE}	70% ^{ACDE}	32%	61% ^{CE}	38%
Refused	3%	2%	1%	4%	7% ^{ABE}	2%
Hispanic	66%	71% ^{CÉ}	79% ^{ACE}	38%	83% ^{ACE}	46%
Non-Hispanic/Refused	34%	29% ^{BD}	21%	62% ^{ABD}	17%	55% ^{ABD}
Education						
8th Grade or less	14%	19% ^{CD}	15% ^D	10%	8%	13%
Some High School	16%	18%	17%	14%	14%	16%
GED/HS Grad	30%	29%	38% ^{CE}	24%	29%	26%
Some College+	40%	33%	30%	51% ^{AB}	50% ^{AB}	45% ^{AB}
# in HH:						
2	5%	7% ^B	2%	7% ^B	6%	4%
3	19%	16%	17%	21%	25% ^{AB}	20%
4	26%	25%	28%	24%	21%	29%
5	24%	24%	23%	25%	22%	23%
6+	26%	27%	30% ^c	22%	26%	25%
Primary HH language:						
English	51%	46%	41%	65% ^{ABD}	43%	69% ^{ABD}
Spanish	29%	37% ^{CDE}	32% ^{CE}	22%	28%	22%
Both	18%	16% ^{CE}	26%A ^{CE}	5%	29% ^{ACE}	9%

Page 2 2015 Target Population

ABCDE Significantly higher than other group

1 Hispanic participants who answered "don't know" and those who refused to answer the question regarding race were included in the "Caucasian/White" segment.

^{*}Percentages may add to more than 100% due to rounding

II. Executive Summary

Summary of Key Measures

Nutrition	2015	2012	Increase /
	n=1196	n=830	Decrease
Median servings of fruits	2.0	1.3	A
Median servings of vegetables	3.3	1.9	A
% who eat at least 2 servings of fruit (includes fruit	61%	34%	A
and fruit juice)			
% who eat at least 3 servings of vegetables	47%	18%	A
% who eat at least 2 servings of fruits & 3 servings of			
vegetables	37%	11%	A
% who eat half of their total grains as whole grains	62%	59%	
% of milk drinkers who drink non-fat or 1% milk	31%	25%	A
Median sugar-sweetened beverages	.4	.7	▼

Physical Activity	2015	2012	Increase / Decrease
% who meet recommendations for aerobic activity			
Moderate	88%	69%	A
Vigorous	48%	34%	A
% who meet recommendations for strength	31%	NA	NA
% who meet recommendations for both	21%	NA	NA

Food Insecurity	2015	2012	Increase / Decrease
% who worried about running out of food			
(often or sometimes)	62%	NA	NA
% who experienced running out of food			
(often or sometimes)	51%	NA	NA

Grocery Shopping	2015	2012	Increase / Decrease
% who use a shopping list (always/often)	55%	64%	▼
% who use coupons (always/often)	22%	47%	▼

Weight Status	2015	2012	Increase / Decrease
% overweight	30%	42%	▼
% obese	42%	26%	A

Awareness of AzNN Program Logos

Of three program logos shown, My Plate was the most recognized, with three-fourths (74%) of women saying they had seen the logo before. Six in ten (62%) women had seen the Fruits & Veggies--More Matters logo, while four in ten women recognized the Champions for Change logo.

Family Meals

• The women interviewed reported eating a meal at home 13.6 times a week, averaging almost two meals a day at home. This is an increase over the 2012 figure of 8.3 times/week. The average number of times per week families eat together is 9.5 times/week, higher than in 2012 (7.7).

Experience with Food Insecurity

• Six in ten (62%) SNAP eligible women said that in the past 12 months they *often* or *sometimes* worried about running out of food before they got money to buy more. Half (51%) of the women said in the past 12 months the food they bought *often* or *sometimes* didn't last and they didn't have money to get more.

Nutrition / Diet

- The median servings of fruits (including juice) increased from 1.3 in 2012 to 2.0 in 2015. While Hispanic women reported an increase in consumption of fruit juice (median of .4 in 2012 to 1.0 in 2015), Non-Hispanics reported an increase in consumption of fruit (.7 in 2012 to 1.0 in 2015). In addition, there was an increase in those who eat at least two servings of fruit a day 34% in 2012 compared to 61% in 2015.
- Women also reported eating more vegetables compared to 2012. The median number of servings of vegetables and beans increased from 1.9 to 3.3 servings per day. Similarly, there was an increase in women who reported eating at least three servings of vegetables per day – 18% to 47%.
- Nine out of ten women (90%) reported consuming some form of dairy in the past week, with cheese being consumed by the largest percentage of women (88%).
 This was followed by milk (83%) and yogurt (65%). Study participants reported consuming a median of one glass of milk per day, comparable to 2012.
- Among women who drink milk, there was an increase in the percentage of women drinking non-fat or 1% milk (from 25% to 31%).
- Fewer women reported drinking sugar-sweetened beverages in 2015 than in 2012 70% and 87%, respectively. The median amount consumed also decreased from .7 to .4, however, the average amount increased from .9 to 1.2.

• Approximately six in ten (62%) women maintain half of the grains they eat are whole grains. This is similar to the 59% reporting so in 2012.

Shopping Preferences

- The vast majority of the women interviewed purchase most of their fruits and vegetables, dairy, and meat/chicken/fish at traditional grocery stores (94%+).
- The most prevalent shopping behavior among the women interviewed was taking their children shopping with them (71%).
- Among health-related shopping behaviors, choosing foods with less added sugar was the health-related behavior practiced by the greatest percentage of women (54%). Four in ten women maintain they always/often read labels for nutrition facts (41%) or ingredient lists (40%).
- Compared with 2012, fewer women used a shopping list (64% vs. 55%), shopped several stores for the best price (59% vs. 42%), or used coupons (47% vs. 22%)

Assistance Programs Participation

- Among eligible women (those with children under 5), 64% have received WIC checks in the past 12 months, the same as in 2012. Six in ten (59%) reported receiving Food Stamps / SNAP in the past 12 months, declining from 69% in 2012. More than half said that someone in their household received free / reduced school lunch / breakfast (54%), slightly higher than 49% in 2012.
- One in five women used a food cooperative in the past 12 months (20%), increasing from just 4% last wave. Participation in the Summer Food Service Program declined dramatically, from 26% in 2012 to 7% this year.
- Among SNAP eligible respondents, four in ten (40%) non-participants said they
 didn't participate in the program because they weren't eligible, and an additional
 13% said they didn't know if they were eligible or not.
- Among non-participating WIC eligible moms, one-third (35%) said they didn't participate because they didn't know if they were eligible, increasing from 22% in 2012. One in ten (12%) said they weren't eligible, about half the number who gave that reason in 2012 (23%).

Physical Activity

Almost nine in ten women (88%) said they have participated in <u>moderate</u> activities for at least 10 minutes at a time in the past week. This is an increase from 69% in 2012. Almost half (48%) reported participating in <u>vigorous</u> activities during that same period, increasing from 34% in 2012.

- Two-thirds of women (69%) reported doing 45 or more minutes of vigorous activity or 145 or more minutes of moderate activity, classifying them as *very active* or *active*. Compared to 2012, there was an increase in the *very active* group, which now represents almost half of all women interviewed (48%, up from 33% in 2012).
- One in ten reported no physical activity in the past week, declining from 27% in 2012.
- Almost one-third (31%) of the women said they participated in musclestrengthening activities or exercises in the past week.

Two in ten (21%) women interviewed met both aerobic and strength activity recommendations.

Weight Status

• Among study participants who provided height and weight information, one in four (26%) is considered *normal weight*, **30% are considered** *overweight*, and **42%** are considered *obese*. Compared to 2012, there are fewer overweight women, and more obese women.

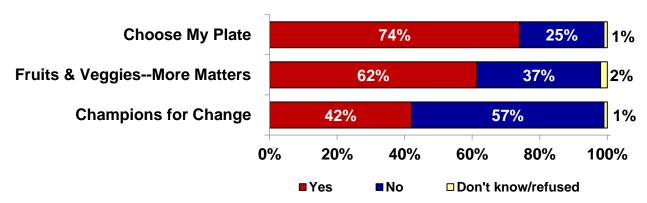
III. Summary of Findings

A. Awareness of AzNN Program Logos

Respondents were shown pictures of three program logos. Choose My Plate was the most recognized picture, with three-fourths of the women (74%) saying they had seen the picture. Six in ten (62%) women had seen the Fruits &Veggies--More Matters picture before, while just four in ten (42%) women recognized the Champions for Change logo.

While there were differences in recognition by location, there was no clear pattern. Champion for Change had higher recognition among Hispanic women than non-Hispanic women.

Aware of Logos - % Yes



Base: n=1196

Q21: Have you seen each of the following pictures before?

Pictures of the logos shown are in the Appendix

Demographic Differences:

Have seen	Phoenix n=301 (A)	Tucson n=304 (B)	N. AZ n=193 (C)	Yuma n=198 (D)	Other n=200 (E)	Hispanic n=784 (F)	Non- Hispanic n=402 (G)	English- Primary n=609 (H)	Spanish- Primary n=349 (I)
Choose My Plate	78% ^E	72%	80% ^{BE}	76% ^E	65%	76%	72%	72%	77%
Fruits & Veggies More Matters	54%	60%	66% ^A	69% ^{AB}	65% ^A	61%	62%	65% ^l	54%
Champions for Change	45% ^E	49% ^{CDE}	38%	39%	32%	45% ^G	36%	38%	46% ^H

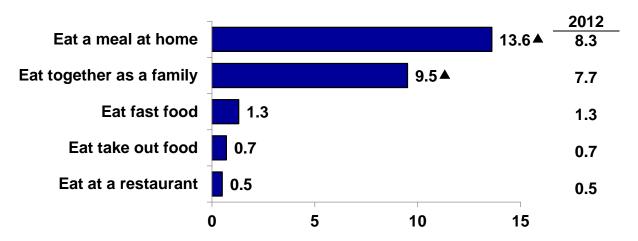
ABCDE Significantly higher than other group

B. Family Meals

The women interviewed reported eating a meal at home 13.6 times a week, averaging almost two meals a day at home. This is an increase over the 2012 figure of 8.3 times/week. The average number of times per week families eat together is 9.5 times/week, higher than in 2012 (7.7).

Women in Yuma and Other areas had a higher level of eating a meal at home than Phoenix and N. AZ women. There were no differences between Hispanic/non-Hispanic women, or between those who speak primarily English/primarily Spanish for their frequency of eating a meal at home or eating together as a family.

Average # times / week



Base: 2015 n=1196, 2012 n=830 ▲/▼ Significantly higher/lower than previous wave

Q1-5: In the past few weeks, how many times did your family . .

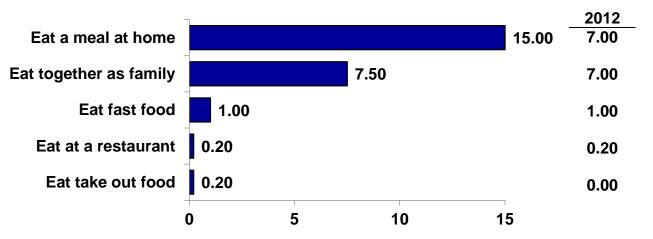
Slight wording change in 2015. In 2012, question asked about 'past week'.

Demographic Differences:

Average # times/week:	Phoenix n=301 (A)	Tucson n=304 (B)	N. AZ n=193 (C)	Yuma n=198 (D)	Other n=200 (E)	Hispanic n=784 (F)	Non- Hispanic n=402 (G)	English- Primary n=609 (H)	Spanish- Primary n=349 (I)
Eat a meal at home	12.6	13.5	12.9	14.8 ^{AC}	14.8 ^{AC}	13.4	14.0	13.6	13.4
Eat together as a family	8.7	9.9 ^A	9.3	10.8 ^{ACE}	9.3	9.5	9.6	9.3	9.5
Eat fast food	1.4 ^E	1.4 ^E	1.2	1.5 ^E	.9	1.4	1.2	1.2	1.3
Eat takeout food	.7	.7	.6	1.1 ^{ABCE}	.6	.8 ^G	.6	.6	.8 ^H
Eat at a restaurant	.6 ^E	.5 [€]	.7	.7 ^E	.3	.6	.4	.4	.6 ^H

ABCDE Significantly higher than other group

Median # times / week



n=1196

Q1-5: In the past few weeks, how many times did your family . . .

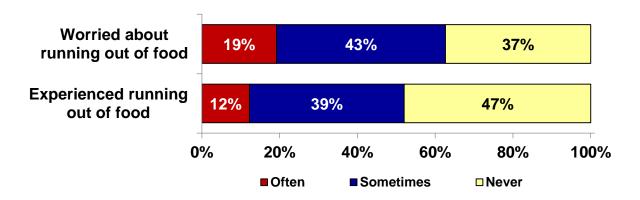
Slight wording change in 2015. In 2012, question asked about 'past week'.

C. Experience with Food Insecurity

Six in ten (62%) SNAP eligible women said that in the past 12 months they often (19%) or sometimes (43%) worried about running out of food before they got money to buy more. Half (51%) of the women said in the past 12 months the food they bought often or sometimes didn't last and they didn't have money to get more.

Women in Yuma were less likely to worry about running out of food than most other areas, or to actually run out of food. Not surprisingly, households participating in some type of food assistance program were twice as likely to worry about or experience running out of food as those not using food assistance programs.

In the past 12 months:



n=1196

Q43: Within the past 12 months we worried whether our food would run out before we got money to buy more.

Q44: Within the past 12 months the food we bought just didn't last and we didn't have money to get more.

Demographic Differences

In past 12 months, Often/sometimes:	Phoenix n=301 (A)	Tucson n=304 (B)	N. AZ n=193 (C)	Yuma n=198 (D)	Other n=200 (E)	Hispanic n=784 (F)	Non- Hispanic n=402 (G)	Food Assist. n=1044 (H)	No Food Assist. n=152 (I)
Worried about running out of food	64% ^D	64% ^D	61%	53%	65% ^D	62%	63%	66% ^l	33%
Experienced running out of food	53% ^D	53% ^D	52% ^D	42%	56% ^D	51%	53%	55% ^l	28%

ABCDE Significantly higher than other group

D. Nutrition/Diet

1. Fruits and Veggies Consumption

There was an increase in consumption of fruits and vegetables in all categories compared to 2012. In 2015, the median intake of fruits (whole and juice) was 2.0, up from a median of 1.3 in 2012. In addition, women reported eating 3.3 servings of vegetables per day in 2015, up from 1.9 servings in 2012.

Hispanic women reported eating more servings/day than non-Hispanics did for all but one fruit and vegetable category measured.

	20	15	2012		
# Servings	Average/ day	Median/ day	Average/ day	Median/ day	
100% pure fruit juice	1.3▲	.6▲	.7	.4	
Fruit (fresh, frozen, or canned)	1.6▲	1.0▲	.9	.8	
Total servings of fruit (whole & juice)	2.9▲	2.0▲	1.6	1.3	
Beans (cooked or canned)	.7▲	.4▲	.5	.3	
Dark green leafy vegetables	1.0▲	.9▲	.6	.4	
Other dark green vegetables	.9▲	.5▲	.4	.3	
Orange or red colored vegetables	.9▲	.5▲	.5	.4	
Other vegetables	.9▲	.6▲	.4	.3	
Total servings of vegetables (vegetables & beans)	4.4▲	3.3▲	2.4	1.9	

Q25-31: Thinking about fruits and vegetables that you ate in the past week, how many servings did you eat or drink of . . .

Fruit juice: 2012 serving is 3/4 cup/6 ounces. 2015: 1/2 cup/4 ounces

▲/▼ Significantly higher/lower than previous wave

Demographic Differences:

Median/day:	Hispanic n=784 (A)	Non- Hispanic n=402 (B)	Spanish- Primary n=349 (C)	English- Primary n=609 (D)
100% pure fruit juice	1.0 ^B	.3	1.0 ^D	.4
Fruit	1.0	1.0	1.0	1.0
Total servings of fruit (whole & juice)	2.0	2.0	2.0	2.0
Beans	.4 ^B	.3	.6 ^D	.3
Dark green leafy vegetables	1.0 ^B	.6	1.0 ^D	.6
Other dark green vegetables	.6 ^B	.4	1.0 ^D	.4
Orange or red colored vegetables	.7 ^B	.4	1.0 ^D	.4
Other vegetables	.9 ^B	.4	1.0 ^D	.5
Total servings of vegetables	3.7 ^B	2.7	NA	NA

ABCDE Significantly higher than other group

2. Grains Consumption

Bread and tortillas had the highest consumption among grains, with average servings/day of 1.2/1.3, respectively. This is higher than the consumption reported in 2012. Cereal and rice consumption was at much lower levels than bread or tortillas, and similar to 2012 findings.

When comparing the percentage of each item that is whole grain, cereal and bread top the list (81% and 75%, respectively). With the exception of pasta, the percentage of whole grains eaten increased for each category over 2012.

		2015		2012			
# Servings	Average/ day	(Mean %)	Median/ day	Average/ day	(Mean %)	Median/ day	
Bread (% whole grain)	1.2▲	75%▲	.9▲	.7	61%	.4	
Cereal (% whole grain)	.7	81%▲	.4▼	.6	64%	.6	
Rice (% brown rice)	.5	22%▲	.3	.4	15%	.3	
Tortillas (% whole grain)	1.3▲	66%▲	.4	.7	53%	.4	
Pasta (% whole grain)	.4▲	27%	.1▼	.3	27%	.3	

Q32-36: Now I'd like to ask you about the grains that you ate in the past week, like bread, cereal, tortillas, rice, and pasta. How many servings did you eat of . . .

^{▲/▼} Significantly higher/lower than previous wave

Demographic Differences

Median/day:	Hispanic n=784 (A)	Non-Hispanic n=402 (B)	Spanish- Primary n=349 (C)	English- Primary n=609 (D)
Bread	1.0	.9	1.0	.9
(avg. % whole grain)	76%	74%	74%	74%
Cereal	.4	.3	.6 ^D	.3
(avg. % whole grain)	82%	79%	81%	80%
Rice	.3	.3	.4	.3
(avg. % brown rice)	20%	25%	19%	23%
Tortillas	1.0 ^B	.3	2.0 ^D	.3
(avg. % whole grain)	73% ^B	49%	84% ^C	51%
Pasta	.1	.3	.3	.3
(avg. % whole grain)	25%	30%	20%	30% ^I

ABCDE Significantly higher than other group

	% of Servings from Whole Grain								
	0%	>0% - <50%	<u>></u> 50% - <100%	100%	Total				
	N %	N %	N %	N %					
Bread	193 20%	17 2%	84 9%	689 70%	983				
Cereal	93 12%	18 2%	102 13%	591 74%	804				
Rice	683 72%	24 3%	83 9%	159 17%	949				
Tortillas	207 23%	25 3%	170 19%	498 55%	900				
Pasta	569 68%	13 2%	72 9%	183 22%	837				

3. Dairy Consumption

Study participants reported consuming a median of one glass of milk per day, comparable to 2012. Consumption of cheese was slightly higher in 2015 than 2012 - .7 median servings per day, up from .4 reported in 2012. There was no change in median servings of yogurt between 2012 and 2015.

This year women reported that half the yogurt they ate was low fat (52%), and one-third (33%) of the cheese they ate was low fat. Both of these are higher levels of low fat than in 2012. Among women who drink milk, there was a decrease in the percentage of women drinking 2% milk (from 48% to 34%). Some of that shift was to more women drinking whole milk, more 1%/skim milk, and more 'other' kinds of milk.

		2015		2012				
# Servings	Average/ day	(Mean %)	Median/ day	Average/ day	(M ean %)	Median/ day		
Cheese (% low fat)	1.3▲	33%▲	.7▲	.6	23%	.4		
Yogurt (% low fat)	.5▲	52%▲	.3	.4	41%	.3		
Milk	1.1		1.0	1.0		1.0		
% whole milk		29%▲			24%			
% 2% milk		34%▼			48%			
% 1%/skim		31%▲			25%			
% soy milk		2%			2%			
% other kind of milk		5%			NA			

Q37-39 Now I'd like to ask you about dairy, such as cheese, yogurt, and milk. Thinking about the amount of dairy that servings did you eat of..

Nine out of ten women (90%) reported consuming some form of dairy in the past week, with cheese being consumed by the largest portion (88%). This was followed by milk (83%) and yogurt (65%). More Hispanic women reported consuming daity than non-Hispanic – 92% and 87%, respectively.

Nine of ten women (91%) who drink milk indicated they drink only one type of milk, with 2% milk being consumed by the greatest number of women (31%), closely followed by drinkers of 1%/skim milk (28%) and whole milk (26%).

^{▲/▼} Significantly higher/lower than previous wave

	N %	Total Responses
	1075	1196
Consumed any dairy products	90%	1100
, , ,	1048	1196
Cheese	88%	
	781	1196
Yogurt	65%	
	982	1191
Milk	83%	
For those who drink milk:		
	258	983
Always drinks whole milk	26%	
	308	983
Always drinks 2% milk	31%	
	275	983
Always drinks skim/low fat/1% milk	28%	
	322	983
Usually + always drinks skim/low fat/1% milk (> 50%)	33%	
	13	983
Always drinks soy milk	1%	
	44	983
Always drinks other kind of milk	5%	
	85	983
Drinks multiple types of milk	9%	

Demographic Differences

Median/day:	Hispanic n=784 (A)	Non- Hispanic n=402 (B)	Spanish- Primary n=349 (C)	English- Primary n=609 (D)
Cheese	.6	.7	.6	.6
(% low fat)	35%	29%	31%	32%
Yogurt	.3 ^B	.1	.3 ^D	.1
(% low fat)	52%	52%	47%	53%
Milk	1.0	1.0	1.0	.9
(% whole milk)	28%	31%	25%	32% ^C
(% 2% milk)	36%	32%	40% ^D	31%
(% 1%/skim)	32%	28%	31%	28%
(% soy milk)	1%	3% ^A	1%	2%
(% other kind of milk)	4%	7% ^A	3%	7% ^C

ABCDE Significantly higher than other group

Note: Sample size for % low fat, % whole milk, etc. varies depending on the percentage who eat that food type

4. Sugar Sweetened Beverages Consumption

While on average, women reported drinking slightly more than one serving of a sugar sweetened beverage each day (1.2) - an increase over 2012 – the median per day decreased from .7 per day to .4 per day. Those who speak primarily English had a higher consumption of sugar sweetened beverages than those speaking primarily Spanish – .6 servings per day compared with .3.

	20)15	2012			
# Servings	Average/ day	Median/ day	Average/ day	Median/ day		
Sugar sweetened beverages	1.2▲	.4▼	.9	.7		

Q53: In the last week, how many servings did you have of sugar sweetened beverages, like a cup of soda pop or a sports drink or fruit drink?

Demographic Differences

Average/day:	Hispanic n=784 (A)	Non- Hispanic n=402 (B)	Spanish- Primary n=349 (C)	English- Primary n=609 (D)
Sugar sweetened beverages	.4	.5	.3	.6 ^D

ABCDE Significantly higher than other group

^{▲/▼}Statistically higher/lower than previous wave

E. Shopping Preferences

1. Purchase Behavior by Food Type

The vast majority of the women interviewed purchase most of their fruits and vegetables, dairy, and meat / chicken / fish at traditional grocery stores (94%+). Flagstaff residents were more likely than those living in all other areas to purchase fruits and veggies at the farmer's market (22% vs. 1-2% for the other markets).

		2015		2012				
Where purchase:	Fruits & Veggies n=1196	Dairy n=1196	Meat, chicken, fish n=1196	Fruits & Veggies n=827	Dairy n=824	Meat, chicken, fish n=828		
Grocery stores	94%▲	99%	98%	91%	98%	98%		
Farmer's Market	5%	*	1%	7%	*	*		
Dollar Store	1%	*	*	1%	1%	*		
Convenience Stores	*	*	*	*	*	*		
All other mentions	*	*	1%	1%	1%	2%		

Q6-8: Where do you buy most of your. . .

Demographic Differences

Where purchas	se:	Phoenix n=301 (A)	Tucson n=304 (B)	N. AZ n=193 (C)	Yuma n=198 (D)	Other n=200 (E)	Hispanic n=784 (F)	Non- Hispanic n=402 (G)	English- Primary n=609 (H)	Spanish- Primary n=349 (I)
	Fruits	and vege	tables							
Grocery store		98% ^C	98% ^C	77%	97% ^C	98% ^C	96% ^G	92%	93%	96% ^H
Farmers markets		1%	1%	22% ^{ABDE}	1%	2%	3%	7% ^F	6% ^l	3%
	Dairy	Products	S							
Grocery store	,	99%	99%	98%	99%	99%	100% ^G	98%	99%	99%
	Meat, chicken, fish									
Grocery store		98%	97%	97%	99%	99%	98% ^G	97%	98%	98%

ABCDE Significantly higher than other group

^{▲/▼}Statistically higher/lower than previous wave

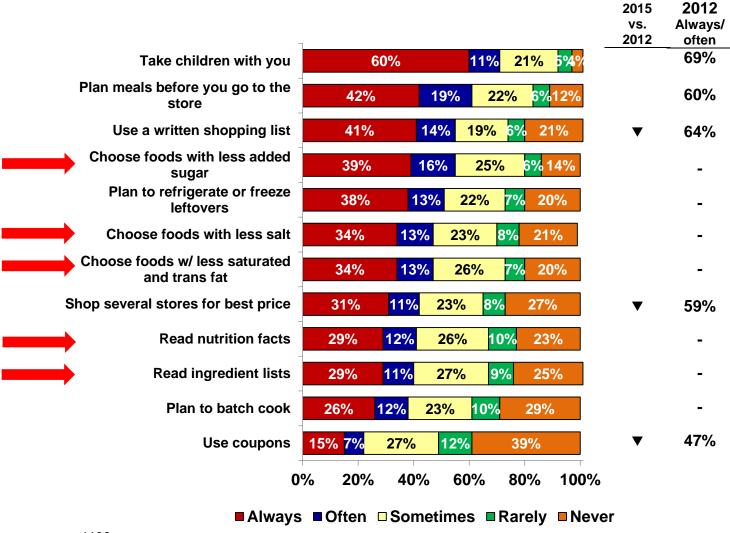
^{* &}lt;.5%.

2. Frequency of Shopping Behaviors

The most prevalent shopping behavior among the women interviewed was taking their children shopping with them (71% always or often).

Health-related shopping behaviors are identified below with the red arrows. Always/often choosing foods with less added sugar was the health-related behavior practiced by the greatest percentage of women (54%). Just over four in ten women always/often read labels for nutrition facts or ingredient lists.

Compared with 2012, fewer women used a shopping list (64% vs. 55%), shopped several stores for the best price (59% vs. 42%), or used coupons (47% vs. 22%)



n=1196

Don't knows not shown; all are .3% or less

Q9-20: When shopping for groceries, how often do you do each of the following activities?

▲/▼ Significantly higher/lower than previous wave

Demographic Differences

% 'Always/often' do when shopping for groceries:	Phoenix n=301 (A)	Tucson n=304 (B)	N. AZ n=193 (C)	Yuma n=198 (D)	Other n=200 (E)	Hispanic n=784 (F)	Non- Hispanic n=402 (G)	English- Primary n=609 (H)	Spanish- Primary n=349 (I)
Take your children with you	64%	69%	77% ^{AB}	76% ^A	71%	71%	70%	65%	74% ^H
Plan meals before you go to the store	60%	61%	55%	62%	66% ^C	58%	65% ^F	54%	58%
Use a written shopping list	50%	55%	48%	58% ^C	65% ^{ABC}	50%	62% ^F	44%	55% ^H
Choose foods with less added sugar	50%	54% ^D	66%	45% ^{ABD}	61% ^{AD}	53%	58%	56%	54%
Plan to refrigerate or freeze leftovers	46%	48%	58% ^{ABD}	47%	64% ^{ABD}	42%	68% ^F	33%	46% ^H
Choose foods with less salt	51% ^D	46%	51% ^D	41%	49%	48%	47%	47%	51%
Choose foods with less saturated and trans fat	50%	47%	51%	46%	44%	50% ^G	43%	43%	54% ^H
Shop at several stores for best price	42%	44%	42%	39%	46%	42%	45%	33%	47% ^H
Read nutrition facts	39%	41%	44%	40%	40%	39%	45%	34%	39%
Read ingredient lists	38%	41%	42%	39%	39%	38%	44% ^F	43% ^l	34%
Plan to batch cook	38%	38%	35%	42%	39%	39%	38%	39%	35%
Use coupons	21%	26% ^C	17%	19%	23%	19%	26% ^F	16%	22%

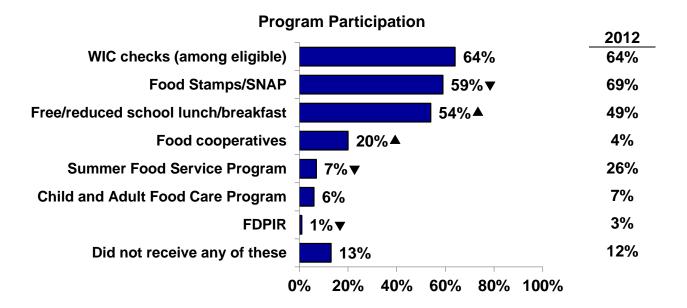
ABCDE Significantly higher than other group

F. Assistance Program Participation

1. Incidence of Participation

Among eligible women (those with children under 5), 64% have received WIC checks in the past 12 months, the same as in 2012. Six in ten (59%) study participants reported receiving SNAP in the past 12 months, declining from 69% the previous wave. More than half said that someone in their household received free / reduced school lunch / breakfast (54%), slightly higher than 49% in 2012.

One in five women used a food cooperative in the past 12 months (20%), increasing from just 4% last wave. Participation in the Summer Food Service Program declined dramatically, from 26% in 2012 to 7% this year.



Q45-52: In the past 12 months, did anyone in your family receive . . .? Base: 2015 n=1196, WIC n=785; 2012 n=830 WIC n=602

▲/▼ Significantly higher/lower than previous wave

Demographic Differences:

% Received:	Phoenix n=301 (A)	Tucson n=304 (B)	N. AZ n=193 (C)	Yuma n=198 (D)	Other n=200 (E)	Hispanic n=784 (F)	Non- Hispanic n=402 (G)	English- Primary n=609 (H)	Spanish- Primary n=349 (I)
Food Stamps/SNAP	60%	66% ^{CD}	57%	54%	59%	56%	66% ^F	66% ^I	47%
Free/reduced school lunch/breakfast	56% ^D	63% ^{CD}	51% ^D	40%	54% ^D	57% ^G	48%	50%	59% ^H
WIC checks (eligible) ¹	60%	55%	50%	83% ^{ABC}	74 % ^{ABC}	67%	60%	61%	67%
Food cooperatives	11%	29% ^{ADE}	25% ^{ADE}	16%	17%	20%	20%	20%	20%
Summer Food Service	7%	4%	9%	7%	8%	7%	8%	7%	7%
Child and Adult Food									
Care Program	5%	4%	6%	9% ^B	8%	6%	6%	6%	7%
FDPIR	1%	1%	2%	1%	1%	1%	2%	1%	*
Did not participate in any of these programs	15% ^B	8%	19% ^{BD}	11%	14%	11%	15%	13%	14%

ABCDE Significantly higher than other group ¹ Sample size smaller than listed since only WIC eligible women included

2. Reasons for Not Participating

Women who said they did not receive SNAP or WIC assistance were asked why they did not participate in the program(s). Among SNAP eligible respondents, four in ten (40%) said they weren't eligible, and an additional 13% said they didn't know if they were eligible or not.

Among WIC eligible moms, one-third (35%) said they didn't know if they were eligible, increasing from 22% who gave that reason in 2012. One in ten (12%) said they weren't eligible, about half the number who gave that reason in 2012 (23%).

For both programs, fewer women said not knowing about the program was the reason they didn't participate. (From 13% in 2012 to 8% for SNAP, and 11% to 3% this year for WIC checks.

^{*} Less than .5%

	20	15	2012		
Reason	SNAP n=485	WIC n=282	SNAP n=261	WIC n=217	
Not eligible	40%	35%▲	34%	22%	
Don't know whether eligible	13%▼	12%▼	25%	23%	
Don't know about the program	8%▼	3%▼	13%	11%	
Enrolling difficult/unpleasant	7%▼	9%	13%	12%	
Immigration status/no papers/not legal	-	-	10%	5%	
Don't need it/others need it more	10%	6%	7%	7%	
Embarrassed/stigma attached/don't want to be judged	*▼	-	5%	2%	
Not worth it/small amount of money	1%	-	1%	2%	
Currently applying/renewing	-	3%	2%	-	
No transportation	-	1%	-	1%	

Q45A/46A: Why would you say you did not participate in _____?

Demographic Differences:

SNAP - %:	Phoenix n=122 (A)	Tucson n=105 (B)	N. AZ n=84 (C)	Yuma n=91 (D)	Other n=83 (E)	Hispanic n=345 (F)	Non- Hispanic n=136 (G)	English- Primary n=200 (H)	Spanish- Primary n=185 (I)
Not eligible	32%	37%	55% ^{ABD}	36%	46% ^A	37%	51% ^F	48% ^l	34%
Don't know whether eligible	18% ^{CE}	20% ^{CE}	2%	13% ^C	7%	17% ^G	4%	6%	22% ^H
WIC - %:	Phoenix n=80 (A)	Tucson n=86 (B)	N. AZ n=57 (C)	Yuma n=26 (D)	Other n=33 (E)	Hispanic n=171 (F)	Non- Hispanic n=107 (G)	English- Primary n=159 (H)	Spanish- Primary n=70 (I)
Not eligible	39%	36%	32%	23%	39%	33%	38%	40%	29%
Don't know whether eligible	13% ^C	20% ^{CE}	4%	8%	6%	18% ^G	3%	8%	17%

ABCDE Significantly higher than other group

^{▲/▼} Significantly higher/lower than previous wave

G. Physical Activity

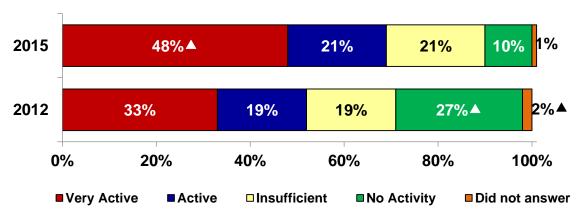
1. Degree of Physical Activity

Two-thirds of the respondents (69%) reported that they did enough physical activity in the past week to be considered *very active* or *active*, meeting the aerobic physical activity recommendations. *Very active* is defined as at least 300 minutes of moderate activity (or at least 150 minutes of vigorous activity) and *active* is defined as at least 150 minutes of moderate activity (or at least 75 minutes of vigorous activity).

Compared to 2012, there was an increase in the *very active* group, now representing almost half of all women interviewed (48%, up from 33% in 2012).

One in ten reported no physical activity in the past week, declining from 27% in 2012.

Physical Activity



Base: 2015 n=1196, 2012 n=830

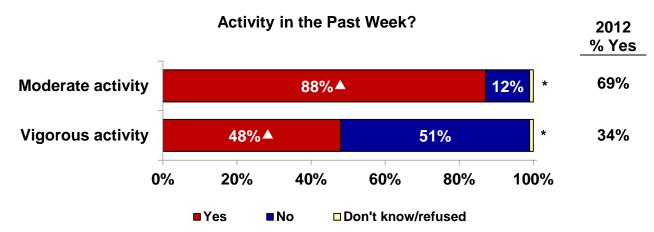
^{▲/▼} Significantly higher than other wave

Almost nine in ten women (88%) said they have participated in <u>moderate</u> activities for at least 10 minutes at a time in the past week. This is an increase from 69% in 2012.

Almost half (48%) reported participating in <u>vigorous</u> activities during that same period, increasing from 34% in 2012.

Among those who reported 10 minutes or more of moderate activity, the average number of minutes for the week was 305 minutes. This equates to an average of almost 44 minutes per day.

Among those reporting they participate in vigorous activities, the average length of time is almost 36 minutes per day, or 251 minutes per week.



n=826

Q22/23: Thinking about the past week, did you do any moderate/vigorous activities for at least 10 minutes at a time, such as walking, bicycling /running, aerobics ...

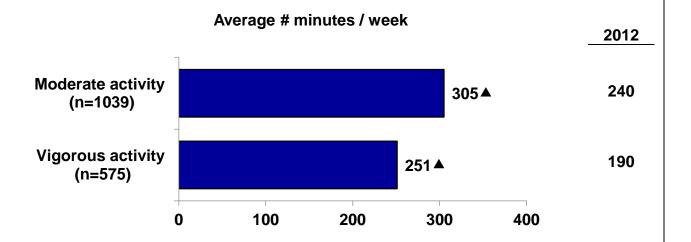
Demographic Differences:

% Did activity in past week:	Phoenix n=301 (A)	Tucson n=304 (B)	N. AZ n=193 (C)	Yuma n=198 (D)	Other n=200 (E)	Hispanic n=784 (F)	Non- Hispanic n=402 (G)	English- Primary n=609 (H)	Spanish- Primary n=349 (I)
Moderate	90%	88%	87%	85%	90%	86%	92% ^F	91% ^l	84%
Vigorous	53% ^{CD}	48%	43%	44%	52%	48%	49%	50%	48%

ABCDE Significantly higher than other group

^{* &}lt; .5%

^{▲/▼} Significantly higher/lower than previous wave



Base: Had _____ activity in past week for at least 10 minutes at a time

Q22B/23B: How many minutes did you spend last week doing moderate/vigorous

activities?

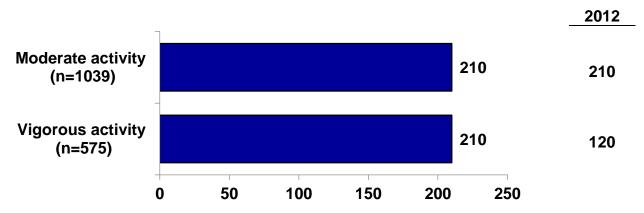
▲/▼ Significantly higher/lower than previous wave

Demographic Differences

Average # minutes/week	Phoenix n=265/ 159 (A)	Tucson n=265/ 145 (B)	N. AZ n=167/ 83 (C)	Yuma n=165/ 85 (D)	Other n=177/ 103 (E)	Hispanic n=666/ 375 (F)	Non- Hispanic n=365/ 196 (G)	English- Primary n=548/ 304 (H)	Spanish- Primary n=289/ 165 (I)
Moderate activity	355 ^{DE}	326 ^{DE}	345 ^{DE}	218	240	292	329	335 ¹	259
Vigorous activity	257	246	281	212	260	250	256	249	248

ABCDE Significantly higher than other group





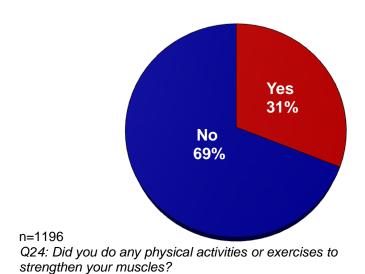
Base: Had _____ activity in past week for at least 10 minutes at a time Q22B/23B: How many minutes did you spend last week doing moderate/vigorous activities?

2. Muscle Strengthening Activities

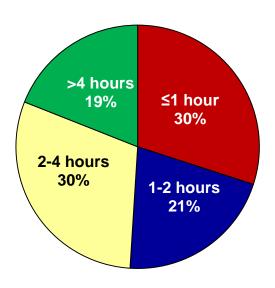
Three in ten (31%) of the women said they participated in muscle-strengthening activities or exercises in the past week.

Among participants, half (51%) of them said they spend two hours or less per week on muscle strengthening activities, while the other half (49%) spend more than two hours per week.

Muscle Strengthening Activities?



Muscle strengthening Hours/week



n=362 Q24 How many minutes did you spend last week doing muscle strengthening activities?

Demographic Differences:

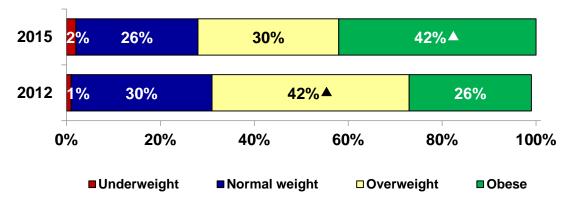
Median # minutes/week	Phoenix n=104 (A)	Tucson n=66 (B)	N. AZ n=66 (C)	Yuma n=56 (D)	Other n=70 (E)	Hispanic n=219 (F)	Non- Hispanic n=140 (G)	_	Spanish- Primary n=85 (I)
Muscle strengthening activity	140	105	138	70	140	120	120	128	140

H. Weight Status

Among study participants who provided height and weight information, one in four (26%) is considered *normal weight*, 30% are considered *overweight*, and 42% are considered *obese*, according to the BMI calculation tables. Compared to 2012, there are fewer overweight women, and more obese women.

In general, the weight status of women was similar across the different demographic groups.

Fewer than one in twenty (3%) respondents did not give enough information to calculate their BMI.



Base: Answered both height and weight questions: 2015 n=1164, 2012 n=640

Q41/42 How tall are you? How much do you weigh?

▲/▼ Significantly higher than other wave

Demographic Differences:

%:	Phoenix n=293 (A)	Tucson n=299 (B)	N. AZ n=187 (C)	Yuma n=192 (D)	Other n=193 (E)	Hispanic n=767 (F)	Non- Hispanic n=391 (G)		Spanish- Primary n=335 (I)
Normal weight	25%	23%	27%	26%	34% ^{AB}	25%	30% ^F	28%	26%
Overweight	29%	34%	31%	27%	28%	31%	28%	28%	33%
Obese	45% ^E	42%	41%	43%	36%	43%	38%	41%	39%

ABCDE Significantly higher than other group

I. Observations

There were several positive indicators when comparing the 2015 results to 2012:

- The number of meals eaten at home increased significantly from an average of 8.3 in 2012 to 13.6 in 2015. Similarly, there was an increase in the number of times families eat together each week 7.7 in 2012 to 9.5 in 2015.
- Consumption of fruits and vegetables increased. In 2015, women reported eating a median of 2.0 servings of fruit/fruit juice each day compared to 1.3 in 2012. In addition, they reported eating a median of 3.3 servings of vegetables each day compared with 1.9 in 2012.
- The percentage of whole grains has also increased for each of the categories tested (bread, cereal, rice and tortillas).
- In 2015, three in ten women (31%) reported drinking 1%/skim milk, up from 25% who reported this in 2012.
- More women reported doing some form of physical activity, with almost nine in ten (88%) reporting they participated in moderate activities for at least 10 minutes at a time in 2015, up from 69% in 2012. There was a similar increase in those participating in vigorous activities during the same period – 48%, up from 34% in 2012.

Other observations:

- Consumption of bread and tortillas is reported to be up: average servings per day of bread is up from .7 in 2012 to 1.2 in 2015. Similarly, average servings of tortillas is up from .7 to 1.3 per day.
- Women reported eating a greater percentage of low fat cheese (23% in 2012 and 33% in 2015); average consumption of cheese is also up .6 in 2012 to 1.3 servings per day in 2015.
- Women reported drinking more sugar sweetened beverages in 2015 than in 2012
 1.2 and .9 servings per day, respectively. However, the median number decreased from .7 to .4.
- According to BMI calculation tables, a greater portion of women (who provided height and weight information) are considered obese – 26% in 2012 and 42% in 2015.

Separately, and with regard to reasons for not participating in assistance programs, confusion about eligibility continues to be a major factor in non-participation in SNAP and WIC.

Appendix

- A. Program logos
- B. Questionnaire

A. Program logos

Champions for Change



Choose My Plate



Fruits & Veggies More Matters



Appendix D WRO Indicator Report



Reporting SNAP-Ed Priority Outcome Indicators - Western Region's SNAP-Ed Evaluation Framework: Nutrition, Physical Activity, and Obesity Prevention Outcomes

States that are using the Western Region's SNAP-Ed Evaluation Framework: Nutrition, Physical Activity, and Obesity Prevention Outcomes are strongly encouraged to report their state outcomes for seven priority indicators using this Template. States may also complete and submit this Template as an attachment to their FFY 2015 Annual Report due on November 30, 2015.

The Western Region SNAP-Ed Evaluation Committee identified these seven indicators in collaboration with national representatives from the Association of SNAP-Ed Nutrition Networks and other Implementing Agencies' (ASNNA) Evaluation Sub-Committee. Reporting these outcomes is a meaningful way to demonstrate SNAP-Ed effectiveness across multiple levels of the social-ecological model and inform continuous program improvement. FFY 2016 priority indicator definitions and instructions are available on the SNAP-Ed Connection under the SNAP-Ed Plan Guidance and Templates. Reporting additional outcomes beyond these seven is also encouraged.

Indicator Code	Indicator Name						
MT1	MyPlate Behaviors						
MT2	Shopping Behaviors						
MT3	Physical Activity Behaviors						
ST4	Identification of Opportunities						
ST6	Partnerships						
MT4	Nutrition Supports Adopted						
MT5	Physical Activity Supports Adopted						

ST=short-term; MT=medium-term

MT1 MyPlate Behaviors

For this indicator, specify the survey(s) or data collection tool(s) and age group(s) surveyed: For each outcome measure, indicate pre scores, post scores, sample sizes, and statistical testing, if applicable. Add additional rows if necessary.

Data Collection Tool: Target Population Survey, 2012 and 2015; intercept interviews conducted in four key markets throughout the state in a wide variety of locations to survey SNAP eligible households in the areas of food shopping and preparation habits, nutrition, food insecurity, and physical activity. Participants received a \$10 gift card for participation and average interview length was 15 minutes.

Age group: SNAP eligible women 18-49 years of age with at least one child 2-11 years of age

Pre survey 2012 (n=830)

Post survey 2015 (n=1196)

*Statistically significant at the 95% level

Outcome Measure	Pre Score (2012 survey) n=830	Post Score (2015 survey) n=1196	Statistical testing
(MT1d) Percent who ate more than one kind of vegetable in the past week	93%	97%*	Independent z-test
(MT1d) Median servings of vegetables in the past week	1.9	3.3*	Mann-Whitney U test
(MT1d) Percent who ate at least 3 servings of vegetables in the past week	18%	47%*	Independent z-test
(MT1f) Percent who did not drink any sugar sweetened beverages in the previous week	13%	30%*	Independent z-test
(MT1f) Median number of servings of sugar sweetened beverages per day in the past week	0.7	0.4	Mann-Whitney U test
(MT1g) Of those who consumed milk last week,	27%	33%*	Independent z-test

percent who drank at least 50% of their milk as low fat milk	n=745	n=983	
(MT1g) Of those who consumed cheese last week, percent who ate at least 50% of their cheese as low fat cheese	27% n=679	35%* n=901	Independent z-test
(MT1g) Of those who consumed yogurt last week, percent who ate at least 50% of their yogurt as low fat yogurt	45% n=556	53%* n=717	Independent z-test
(MT1i) Of those who consumed grains last week, percent who ate half of their total grains as whole grains	59% n=399	62% n=432	Independent z-test

MT2 Shopping Behaviors

For this indicator, specify the survey(s) or data collection tool(s) and age group(s) surveyed: For each outcome measure, indicate pre scores, post scores, sample sizes, and statistical testing, if applicable. Add additional rows if necessary.

Data Collection Tool: Target Population Survey, 2012 and 2015; intercept interviews conducted in four key markets throughout the state in a wide variety of locations to survey SNAP eligible households in the areas of food shopping and preparation habits, nutrition, food insecurity, and physical activity. Participants received a \$10 gift card for participation and average interview length was 15 minutes.

Age group: SNAP eligible women 18-49 years of age with at least one child 2-11 years of age

Pre survey 2012 (n=830)

Post survey 2015 (n=1196)

*Statistically significant at the 95% level

The survey was conducted in 2012 and 2015 with additional questions added in 2015 that were not in the 2012 survey which prevents a pre score and post score for some outcome measures.

Outcome Measure	Pre Score (2012 survey) n=830	Post Score (2015 survey) n=1196	Statistical testing
(MT2b) Percent who read ingredients lists often or always	Not collected	40%	Frequency
(MT2b) Percent who read nutrition facts, often or always	Not collected	41%	Frequency
(MT2e1) Percent who buy foods with less saturated or trans fat, often or always	Not collected	47%	Frequency
(MT2e2) Percent who buy foods with lower added sugar, often or always	Not collected	55%	Frequency
(MT2e3) Percent who buy foods with less salt, often or always	Not collected	48%	Frequency
(MT2f) Percent who in the last 12 months worried about running out of food before getting more money, often or sometimes	Not collected	62%	Frequency
(MT2f) Percent who in the last 12 months whose food didn't last and didn't have money to get more, often or sometimes	Not collected	51%	Frequency
(MT2g) Percent who shop at several stores to get the best price, often or always	59%*	42%	Independent z-test
(MT2h) Percent who use coupons, often or always	47%*	22%	Independent z-test
(MT2i) Percent who use a written shopping list, often or always	64%*	55%	Independent z-test

(MT2k) Percent who plan to batch cook (cook once and eat many times), often or always	Not collected	38%	Frequency
(MT2l) Percent who plan to refrigerate or freeze leftovers, often or always	Not collected	51%	Frequency

MT3 Physical Activity Behaviors

For this indicator, specify the survey(s) or data collection tool(s) and age group(s) surveyed. For each outcome measure, indicate pre scores, post scores, sample sizes, and statistical testing, if applicable. Add additional rows if necessary.

Data Collection Tool: Target Population Survey, 2012 and 2015; intercept interviews conducted in four key markets throughout the state in a wide variety of locations to survey SNAP eligible households in the areas of food shopping and preparation habits, nutrition, food insecurity, and physical activity. Participants received a \$10 gift card for participation and average interview length was 15 minutes.

Age group: SNAP eligible women 18-49 years of age with at least one child 2-11 years of age

Pre survey 2012 (n=830)

Post survey 2015 (n=1196)

*Statistically significant at the 95% level

Outcome Measure	Pre Score (2012 survey) n=830	Post Score (2015 survey) n=1196	Statistical testing
(MT3a) Percent who report vigorous physical activity in the past week	34%	48%	Independent z-test
(MT3b) Percent who report strength training in the past week	Not collected	31%	Frequency
(MT3e) Percent who report no moderate or vigorous physical activity in the past week	29%*	11%	Independent z-test
(MT3f) Of those reporting moderate physical activity in	240 minutes	305 minutes*	Independent t-test

the past week, average number of minutes doing moderate activities	n=570	n=1039	
(MT3f) Of those reporting vigorous physical activity in the last week, average number of minutes doing vigorous activities	190 minutes n=273	251 minutes* n=575	Independent t-test
(MT3h) Percent who report moderate physical activity for at least 10 minutes in the past week	69%	88%*	Independent z-test

ST4 Identification of Opportunities

For this indicator, specify the number of organizations/sites that are means-tested or located in low-income areas that have documented needs for changes in organizational environments and policies that will support healthy eating and active living. List the number of organizations by categories below. Identify the types of settings, needs assessment survey or process used, and overarching themes identified

Quarterly reports from contractors were used as a collection tool to report the identification of opportunities.

Eat	N/A
Live 214 sites	Garden promotion at ECE fairs, Weekly garden TA provided regarding food bank clients' gardens and at garden workshops. Partnership with Food Corps to promote school gardens and garden clubs. Food demos at rural chain stores. School and community events; Walk to School Days.
Learn 408 sites	Wellness committee at ECE sites to improve policies and implementation District Wellness Committees and School Health Advisory Councils
Work	Public government worksite with wellness committee; Promoted adoption of worksite wellness policy to include healthy meeting

1 site	strategies, PA breaks, and POD in break room to encourage healthier vending food choices.
Play 26 sites	Parks were identified in SNAP eligible areas. The parks were assessed at multiple times of day and on more than one day using System for Observing Play and Recreation in Communities (SOPARC). It was noted that many of the parks were vacant or underutilized at all times of day.
Shop	N/A

ST6 Partnerships

For this indicator, identify the number of organizational partnerships, councils, or collaboratives that organize themselves around a common SNAP-Ed agenda, mission, or strategic plan to adopt nutrition or physical activity practices or standards in settings where nutrition education is provided. List the number of organizations by categories below. Identify the types of settings and where applicable, identify specific partnership accomplishments.

Eat	N/A
Live	Partnership with a Native American Tribal Council, community colleges, cities, local libraries, food banks; Participation in health-related coalitions.
Learn	Partnerships with schools to provide direct education programming; Collaboration with school districts to develop Local Wellness Policies (LWP).
Work	Partnerships with community and regional health promotion groups; Partnership with a local government agency and local school district to develop a wellness program and wellness plan.
Play	Partnerships with communities to promote walking/biking events, trails; Partnership with a hospital health-related community coalition; Partnerships with city coalitions and community recreation sites.
Shop	N/A
Other	224 Partnerships identified with MOU/MOA's in place. 45 organizational partnerships identified by the contractors in their quarterly reports.

	MT4 Nu	ıtrition Sup _l	ports Adopte	d		
	For this settings access o Opportu Similarl encounte	MT4 Nutrition Supports Adopted For this indicator, report the number and percentage of organizational settings where at least one change is made in writing or practice to expand access or improve appeal for healthy eating. Use the ST4 (Identification of Opportunities) count as the denominator to calculate a proportion. Similarly, report the SNAP-Ed eligible audience and total audience who encounter the improved environment on a regular (typical) basis and are assumed to be influenced by it.				
	Eat	Live	Learn	Work	Play	Shop
Number of settings in ST4	N/A	214	408	1	27	N/A
Number of settings with changes adopted	N/A	179 84%	1287 315%	2 200%	46 170%	N/A
SNAP-Ed Eligible Population	N/A	N/A	N/A	N/A	N/A	N/A
SNAP-Ed Population Reached	N/A	N/A	N/A	N/A	N/A	N/A
Total Population Reached	N/A	N/A	N/A	N/A	N/A	N/A
Policy, systems, or e	environme	ental change	s adopted			
Policy, system, or environmental change 1						
Policy, system, or environmental change 2						
Policy, system, or environmental change 3						
Policy, system, or						

environmental change 4						
	MT5 Ph	ysical Activ	ity Supports	Adopted		
	settings access o Opportu Similarl encounte	For this indicator, report the number and percentage of organizational settings where at least one change is made in writing or practice to expand access or improve appeal for active living. Use the ST4 (Identification of Opportunities) count as the denominator to calculate a proportion. Similarly, report the SNAP-Ed eligible audience and total audience who encounter the improved environment on a regular (typical) basis and are assumed to be influenced by it.				actice to expand lentification of portion. audience who
	Eat	Live	Learn	Work	Play	Shop
Number of settings in ST4	N/A	214	408	1	27	N/A
Number of settings	N/A	42	486	0	49	N/A
with changes adopted		20%	119%	0%	181%	
SNAP-Ed Eligible Population	N/A	N/A	N/A	N/A	N/A	N/A
SNAP-Ed Population Reached	N/A	N/A	N/A	N/A	N/A	N/A
Total Population Reached	N/A	N/A	N/A	N/A	N/A	N/A
Policy, systems, or e	environme	ntal change	s adopted			
Policy, system, or environmental change 1						
Policy, system, or environmental change 2						

Policy, system, or environmental change 3	
Policy, system, or environmental change 4	

Appendix E Partner Satisfaction Survey



ARIZONA NUTRITION NETWORK FY 2015 PARTNER SATISFACTION SURVEY

Arizona Department of Health Services Bureau of Nutrition and Physical Activity Research and Development

September 21, 2015









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ARIZONA NUTRITION NETWORK FY 2015 PARTNER SATISFACTION SURVEY

INTRODUCTION

The mission of the Arizona Nutrition Network (AzNN) is to shape food consumption in a positive way, promote health, and reduce disease among all people living in Arizona. The AzNN's work is accomplished through network partners who provide nutrition and physical activity education and implement obesity prevention strategies. Additionally, the AzNN implements statewide campaigns through the use of media and promotional materials. Partners in the network include local health departments, the University of Arizona, Native American tribes, school districts, food banks, and non-profit agencies.

For the purpose of continuously improving the AzNN, a survey¹ was developed to measure the partners' satisfaction with the Network. The survey assesses partners' satisfaction with planning and implementation, technical assistance, communication, progress and outcome, materials, AZ Nutrition Network Subcommittees, and AZ Nutrition Network Overall.

METHODS

A link to the web-based survey was emailed in June 2015 to 121 partners. There were a total of 33 respondents to the survey for a response rate of 27%.

There were eight sections to the survey related to the areas of the Network including Planning and Implementation, Technical Assistance, Communication, Leadership, Progress and Outcome, Materials, AZ Nutrition Network Subcommittees, and AZ Nutrition Network Overall. Respondents were asked to rate their level of satisfaction on a scale of Very Dissatisfied, Dissatisfied, Satisfied, Very Satisfied with an option to select Not Applicable. Dissatisfied and Very Dissatisfied were combined as well as Satisfied and Very Satisfied to create a dichotomous satisfaction variable. In each section, respondents were asked to compare their satisfaction in Fiscal Year 2014 to their satisfaction in Fiscal Year 2015 based on the following categories: Became Worse, Stayed the Same, and Improved.

RESPONDENTS

Participants were asked to check all levels of involvement that applied to them. The majority of respondents, 61%, had involvement with the AzNN as a Local Snap-Ed Implementation Partner, 27% as sub-committee members, and 9% as state level collaborative partners. For those that chose Other, they were identified as follows: 3% county level, 3% subcontractor, and 3% community dietitian. Fifteen percent of respondents did not choose any level of involvement.

¹The survey is an adaptation from Fawcett, S., Foster, D. & Francisco, V. (1997). "Monitoring and evaluation of coalition activities and success", in Kaye, G. & Wolff, T. (Eds.) "From the ground up: A workbook on coalition building and community development". Amherst, MA: AHEC/Community Partners, pp.163-185.

Participants were also asked how long they had been involved with the AzNN. Nearly half of respondents, 48%, have been involved for five or more years. Of the remaining responses, 6% had been involved for less than one year, 18% for one to less than three years, and 12% indicated three to five years. Fifteen percent did not provide an answer. See Figure 1.

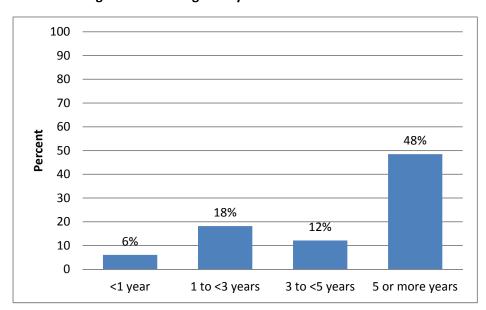


Figure 1: How long have you worked with the AzNN?

ARIZONA NUTRITION NETWORK OVERALL

Partners were asked to rate their level of satisfaction with the AzNN Overall. Eighty-six percent of respondents selected either satisfied or very satisfied. Partners were also asked to rate how the AzNN Overall has changed from FY 2014 to FY 2015; 4% rated it as becoming worse, 54% as stayed the same, and 42% as improved. See Figures 2 and 3.

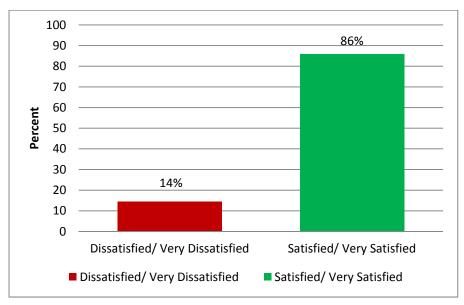
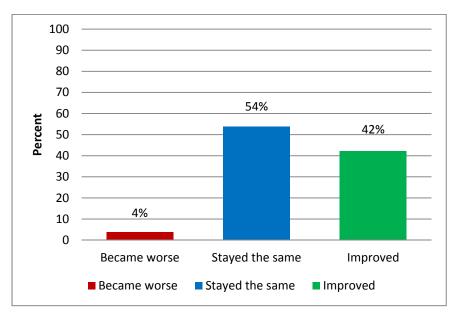


Figure 2: How satisfied are you with the AzNN Overall?





In Table 1, respondents refer to the hiring freeze and staffing shortage at ADHS as an obstacle. Some also mention issues with the curriculum. However, new leadership was considered a strength for the AzNN team. See Table 1 for unedited comments.

Table 1: AzNN Overall Comments

We understand the challenges AzNN is under with the hiring freeze and the number of vacancies and that your office if doing the best it can right now and we appreciate your dedication

2014-2015 was sort of a "throw-away" year due to the curriculum being all over the place, having to recreate curriculum for a year only to have it change once again.

Confident in new leadership. I understand there is a lot of change and a lot of things happening this fiscal year. I hope AzNN can figure itself out so it can help its contractors and subcontractors, as they are a little lost because AzNN can't give clear direction. I'm hopeful that AzNN staff can be involved in PSE once things settle down (which they hopefully do).

I don't think it is dissatisfaction. I have concerns about being able to implement what is being asked of us. I think there are too many holes in the curriculum that was selected. It would be nice to fill those holes with something. If you can't find something that is evidence based, you still give us something. Small concerns about transparency.

I know that the State is short-staffed but there is a lot of confusion over what can be used and how often.

Stephanie's leadership has been great! Wish the hiring freeze didn't interfere with the staffing...

The AzNN has done a great job of being supportive of partners' needs and endeavoring to maintain open communication along with providing TA, in spite of the seemingly constant challenges with amendments, budget cuts, etc.

They are doing the best they can do with staff they have. But leaving a lot of gaps.

PLANNING AND IMPLEMENTATION

There were seven components related to planning and implementation which include clarity of the AzNN vision, planning processes for objectives, utilization of partner input, follow-through on activities, efforts to improve collaboration, staff competence, and needs assessment processes. As shown in Figure 4, the respondents were satisfied with planning and implementation. More than 90% of respondents were satisfied with the competence of staff. Almost 40% were dissatisfied with the processes used to assess the communities' needs.

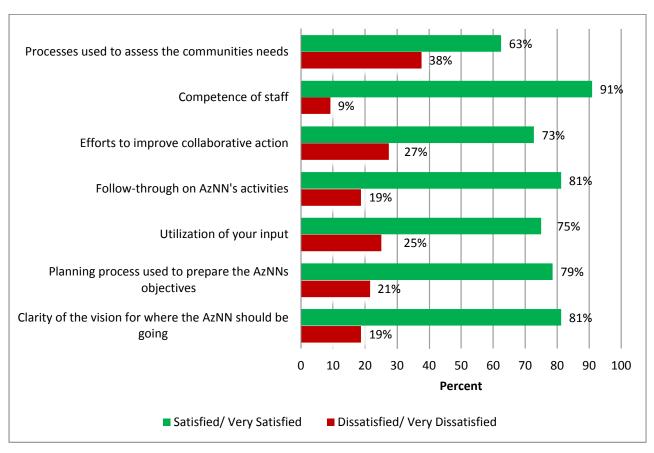


Figure 4: How satisfied are you with the following?

Respondents felt the clarity of vision, utilization of partner input, efforts to improve collaborative action, and competence of staff all improved in FY15 when compared to FY14. A few respondents felt the processes used to assess the communities' needs became worse. None of the respondents felt the planning processes used to prepare the AzNN's objectives became worse. See Figure 5.

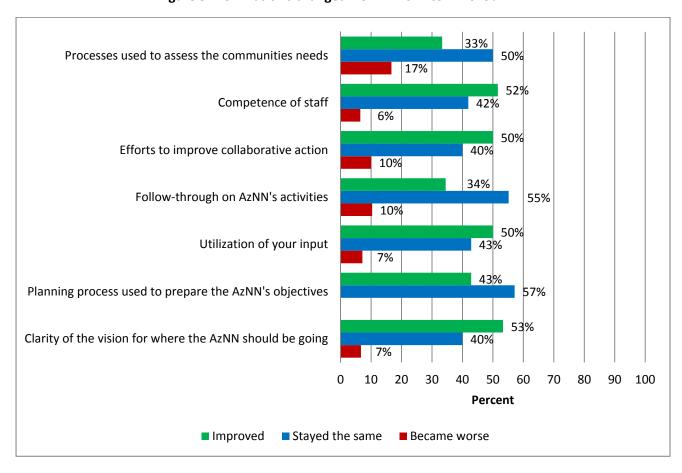


Figure 5: How has this changed from FY2014 to FY2015?

Overall, AzNN partners recognize the changes within leadership in the past year and are hopeful that things will begin to improve. Respondents are also aware that the state is understaffed which creates many challenges with implementation. See unedited comments in Table 2.

Table 2: Planning and Implementation Comments

AzNN has improved from the interim manager last year but there are still some challenges/confusion with implementation of the AzNN grant and the reversal of decisions made last grant year.

Confident in new leadership, but we are still in a transition period so AzNN has to re-figure itself out.

I really don't know of the process(es) used to assess the communities' needs, so I put "N/A" in hopes to not skew data.

I think the AzNN has undergone some big changes, which affected follow through and planning, but I feel like the managers/staff have been very proactive over the last 5 months about improving in FFY16 and collaborating, so it's very encouraging.

I was not employed in FY2014

I've only just recently begun working with AzNN so I'm unable to compare across years.

It is really hard to run a program with this magnitude with a handful of people.

Need to get input from all staff not just managers.

New evaluations, such as SOPARC and SOPLAY, and the desired implementation by contractors are exceedingly difficult to use and implement. When speaking with community individuals about the process they said that if they didn't know me and saw me in the park everyday at the same time for a period of time

they would call the cops. This attitude would be even more difficult to overcome if we had male staff.

Stability of program leadership has been a big benefit to SNAP-Ed. Stephanie Martinez has made huge strides to stabilize the program, align with other efforts across the state, and listen to partners. The departure of less competent and/or less community-engaged staff has benefited partners and our communities, although it is clear that SNAP-Ed is currently understaffed to achieve mission critical objectives.

TECHNICAL ASSISTANCE

In the technical assistance category, there were 10 related components addressing the availability and ability of AzNN staff to answer questions, the clarity and continuity of technical assistance, trainings, webinar series, in-person workshops, contractor meetings, promotion of non-SNAP Ed funded trainings, and the frequency of trainings. Overall, respondents were satisfied with the technical assistance from AzNN. More than 30% of respondents were dissatisfied with both the clarity and continuity of technical assistance. One hundred percent of respondents were satisfied with the contractor meetings. See Figure 6.

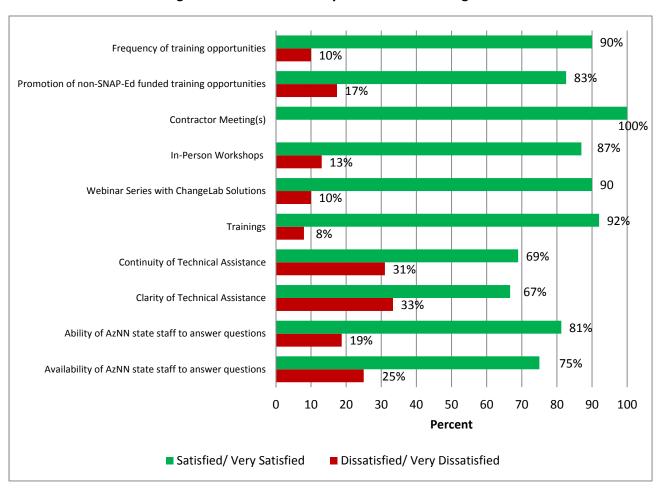


Figure 6: How satisfied are you with the following?

From FY 2014 to FY 2015, respondents felt that the trainings including the ChangeLab Solutions webinar series, in-person workshops, and contractor meetings had improved. About one-third of respondents indicated things had become worse in the areas of availability (29%) of AzNN staff to answer questions. Some respondents felt clarity and continuity of technical assistance had become worse as well, 12% and 19% respectively. See Figure 7.

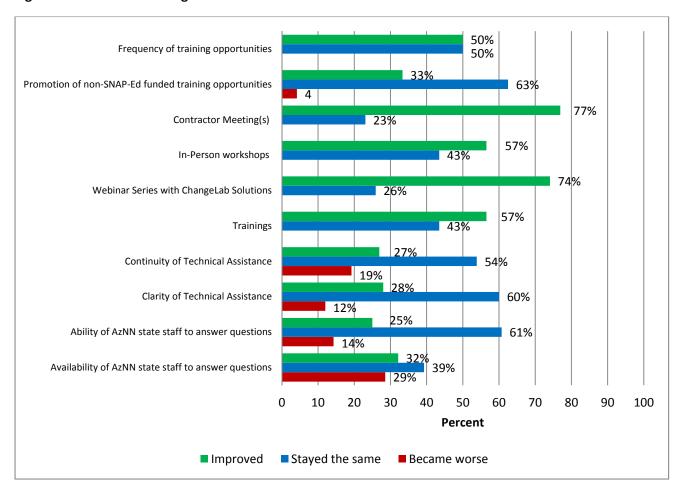


Figure 7: How has this changed from FY2014 to FY2015?

Respondents were asked what training topics they would like to see in the future. Some examples include CATCH training, training on any newly introduced curriculum, training covering implementation of curriculum, and trainings focusing on successes in other states. Comments in Table 3 edited only for spelling.

Table 3: What training topics would you like to see in the future?

Another CATCH Kids Club training for new staff; CATCH for ECE training; more on Healthy Retail;

Any curriculum offered, should have a training. More technical assistance to the focus areas of School Health, Active Living and Food Access.

classroom management; round table with other contractors presenting practices

How to implement approved nutrition curricula effectively to assure fidelity to evidence-based approaches). Appropriate physical activity demonstrations with various audiences (seniors, preschoolers, age-appropriate

youth, adults, etc.). More evaluation support and training, for example, how to proctor pre/post surveys to get the highest quality results. And of course, more PSE trainings and support. This year has been a big improvement, but more more more trainings for PSEs would be helpful as staff learn and/or change.

How to use evaluation tools correctly

I would like to have nutrition education updated training. bring back CATCH for a review.

Linking statewide marketing efforts with community education provided by the contractors

More on physical activity for all age levels and working with poverty populations. (extreme poverty)

More trainings on approved curricula and lessons.

Pop-up healthy food retail, "Poverty 101" mandatory for all staff just like food demo training

Public Health Approaches and working more effectively in the childcare setting

School Health: Local Wellness Policy updates and implementation strategies Nutrition Fundamentals: basic nutrition & brain/body information for background information

Successful SNAP-Ed programs in other states. What are other states and cooperative extensions doing with lessons and curricula.

Of the comments regarding Technical Assistance, some respondents felt that the ChangeLab Solutions webinar series was not relevant or applicable to Arizona. Respondents express frustration with ADHS in the areas of response time, staff turnover, mixed messages, staff shortage, and grant issues. Comments in Table 4 edited only for spelling.

Table 4: Technical Assistance Comments

Change Lab Solutions does not do a good job of providing information that pertains to Arizona. What works in other parts of the country is not always applicable to Arizona.

A lot of the dissatisfied remarks are because of the AzNN staff turnover/lack of replacements

Annual meeting was the best ever!

AzNN Staff can't answer questions due to competitive nature of the grant cycle, which is a bummer but not unexpected. However, AzNN official response time via bid website was slow and bad.

ChangeLab does a good job on examples from other states but AZ has challenges that are different from California, New York, and Massachusetts. What works there does not always apply to AZ.

I think a good job has been done with the training. Again, I will say that it is impossible to provide a continuation of services with a skeleton crew. I believe that you are doing the best that you can do with what you have.

I would really like to see AzNN hire a dedicated training specialist. Outside contractors can be helpful, but sometimes do not understand the community context of our programs, or are more interested in advancing a personal agenda (i.e. Dr. Beegle) than building partner capacity. I could envision trainings on practical matters (effective quarterly reporting) as well as increasing the quality of DE and PSE interventions.

Mixed messaging in terms of protocol and next-steps still seems to persist a bit

One of my agency's issues is the lack of response from ADHS AzNN Staff. When we send an email or leave a voice mail it would be nice to get a response even if the response says - "We will get back to you". There are many times when we send an email / leave a voice mail and SEVERAL weeks go by without a response at all which is very unprofessional. Many times our community partners are waiting for the answers we need from ADHS.

The lack of staff at AzNN has made the Q&A, approval, site additions, etc. much slower which has a negative impact on our programming.

there was too much redundancy between webinars and trainings at conference

LEADERSHIP

To measure the level of satisfaction with leadership, there were five components on the survey, which includes competence of AzNN's leadership, subcommittee leadership, sensitivity to cultural issues, opportunities for AzNN to have leadership roles, and trust between network members. As shown in Figure 8, more than 70% of respondents were satisfied or very satisfied. From FY 2014 to FY 2015, respondents felt the AzNN leadership had improved. Regarding sensitivity to cultural issues, 80% felt it had stayed the same and none felt that it had become worse; for the opportunities for AzNN members to take leadership roles component, none felt that it had become worse and more than 60% felt it had stayed the same; in the area of trust between network members, 16% of respondents felt it had become worse while 32% felt that it had improved. See Figure 9.

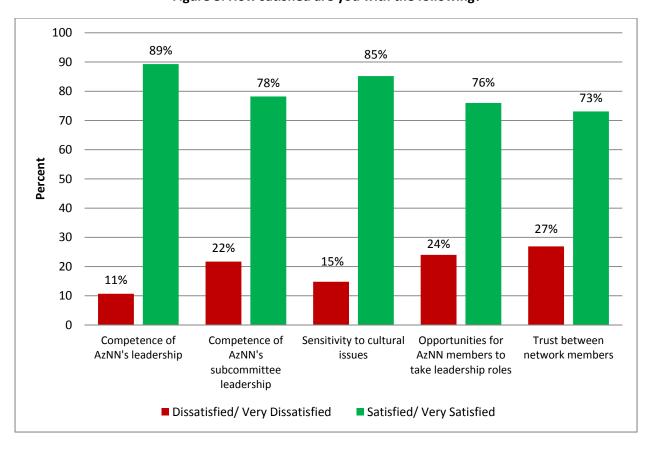


Figure 8: How satisfied are you with the following?

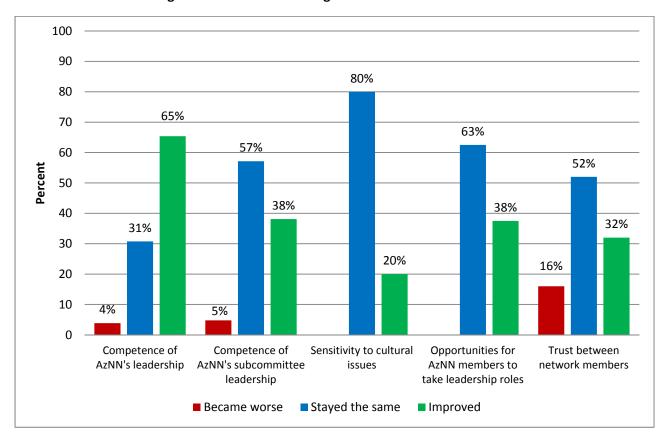


Figure 9: How has this changed from FY2014 to FY2015?

The comments in the leadership section indicate that the nature of the USDA grant contributes to less trust between partners and to the implementation of recommendations or input from AzNN members. Respondents are pleased with current ADHS leadership. Comments in Table 5 edited only for spelling.

Table 5: Leadership Comments

Although there are opportunities for AzNN members to be involved, their input and recommendations are not always used or considered. USDA regulations do play a part in this.

Competitive grant cycle = less network trust, but that's to be expected

I don't see the relevancy yet of some of the sub committees. The materials sub-committee was very relevant. I think there is distrust with the direction of the U of A and how they are handling their contract expansion.

Please do not change AzNN leadership. Stephanie Martinez is the first program manager in a long time (I've been around through at least four AzNN program managers) to do all of these things: 1) Value partners' experiences and perspectives, 2) See the big picture for AzNN's current and future success, 3) Leverage ADHS and USDA resources to strengthen the program.

Stephanie's leadership has been a real asset to the Network.

The relationship with MCPHD and UA-Maricopa has improved drastically over the last year or two.

COMMUNICATION

To assess the level of satisfaction of communication, partners were asked questions regarding communication among members of the AzNN; communication between the AzNN and the broader community; the extent to which AzNN members' concerns are listened to and heard; information provided on issues and available resources; and content in the bi-weekly AzNN update emails. Overall, the level of satisfaction toward communication was high with content in the bi-weekly AzNN update emails at 100%. Thirty-eight percent of respondents were dissatisfied with the communication between the AzNN and the broader community. See Figure 10. As shown in Figure 11, from FY 2014 to FY 2015, the majority of respondents indicated that communication aspects had stayed the same. More than 60% of respondents rated the content in the bi-weekly AzNN update emails had improved.

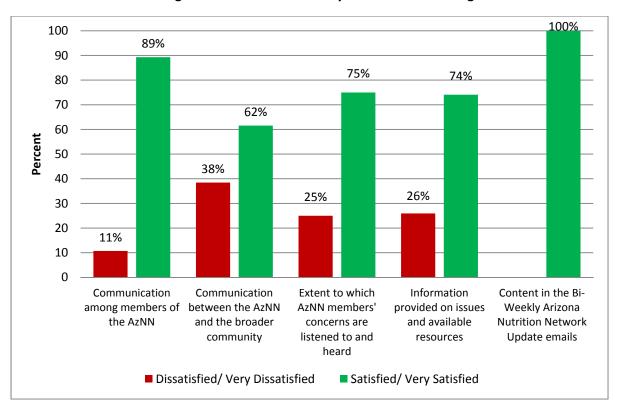


Figure 10: How satisfied are you with the following?

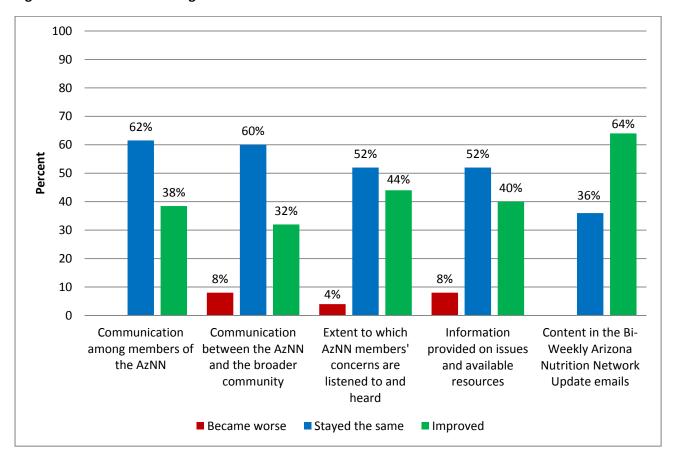


Figure 11: How has this changed from FY2014 to FY2015?

The comments in the communication section indicate frustrations with ADHS responses to questions due to the staff shortage. Respondents found the bi-weekly email content beneficial. See unedited comments in Table 6.

Table 6: Communication Comments

Again, we do not get timely response from the ADHS staff person assigned to our agency.

Budget cuts and staff hiring freezes have impacted AzNN's ability to do a lot.

Provide more breastfeeding workshops, since some of us are Certified Breastfeeding Counselors. I would like to continue with this education.

The bi-weekly updates are so improved - lots of interesting content and relevant updates. Most of the challenges with staffing and communication is just understaffing - AzNN needs more staff and expertise (i.e. partnership consultants, evaluation) to be fully effective.

We don't have communication between the AzNN and the broader community in our area.

We heard from outside community agencies about the NEAT working group and plans for SNAP-ed involvement. We are concerned that this was not communicated to AzNN partners and outside for profit and consulting agencies are determining the direction and framework of our SNAP-Ed program including curricula and delivery of classroom education.

PROGRESS AND OUTCOME

To assess progress and outcome, survey respondents were asked to rate their level of satisfaction with the amount members support each other; AzNN's contribution to improving nutrition and physical activity practices in the community; and collaborative partnerships with existing USDA programs/other obesity prevention program. In all categories, the level of satisfaction was at 70% or higher for satisfied or very satisfied. See Figure 12. In Figure 13, respondents felt improved areas were AzNN's contribution to improving nutrition and physical activity in the community and collaborative partnerships with existing programs from FY14 to FY15.

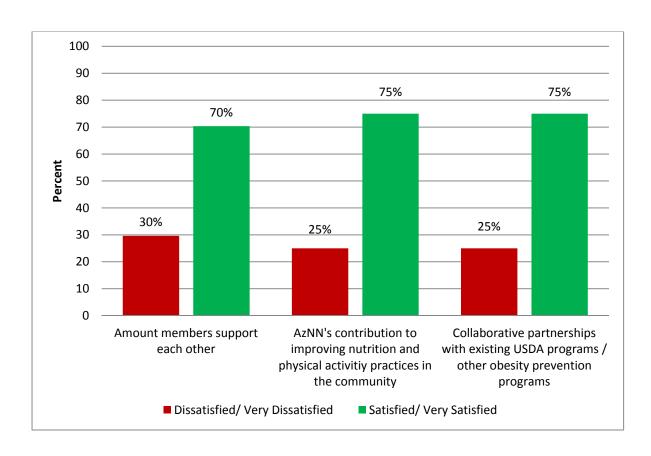


Figure 12: How satisfied are you with the following?

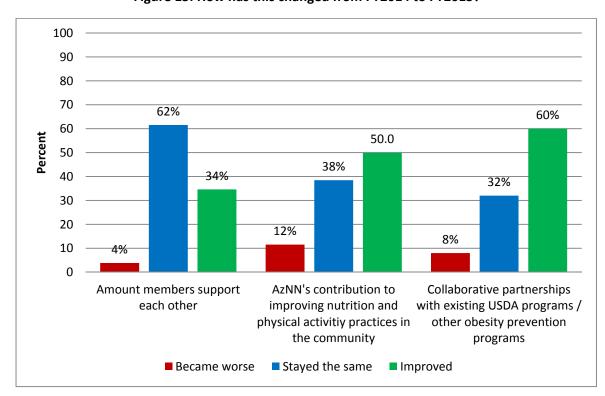


Figure 13: How has this changed from FY2014 to FY2015?

The collaboration with the University of Arizona and competition between contractors for the same grant funds is seen as a threat to some respondents. See unedited comments in Table 7.

Table 7: Progress and Outcome Comments

It would be good to include promising practices in the approved curricula list as there is limited evidenced based curricula that meets the needs of our school programs.

Amount members support each other: Often seems that there is undermining in shared regions or the attempt to take everything over by the UofA recipients of grant money. The county health depts and other entities are definitely the minority and UofA appears to appreciate that position during meetings.

AzNN is busy, and was in a transition period, so they are working on it.

Even though we know who we should work with, that doesn't mean that we will be able to work with these groups.

There has been an emphasis placed on collaborating with other network partners and this has resulted in working together in a way that previously did not occur. I believe this will result in having a great impact in the community.

There is an inherent tension for contractors "supporting" each other who are also competing for the same funding. That said, committees are probably the best way at the moment of encouraging collaboration and trust.

MATERIALS

There were two sections to the materials category with questions related to materials provided and to material design. Figure 14 displays the level of satisfaction for the use of the media to promote awareness of the AzNN's messages; the availability of materials and incentive items; the on-line distribution system; and appropriateness of materials to the target population. Across all five components, over 70% of respondents reported either satisfied or very satisfied. Twenty-seven percent of respondents felt dissatisfied with the availability of incentive items. In regards to material design, respondents were asked to rate their level of satisfaction across seven components: Fun Food News/Senior Bulletin; Posters; Recipe Cards; Incentive Items; TV ads, Website, Partner Tools; "Vegetables & Fruits"; and "Family Meals". For each component, more than 80% rated their level of satisfaction as satisfied or very satisfied. See Figure 15.

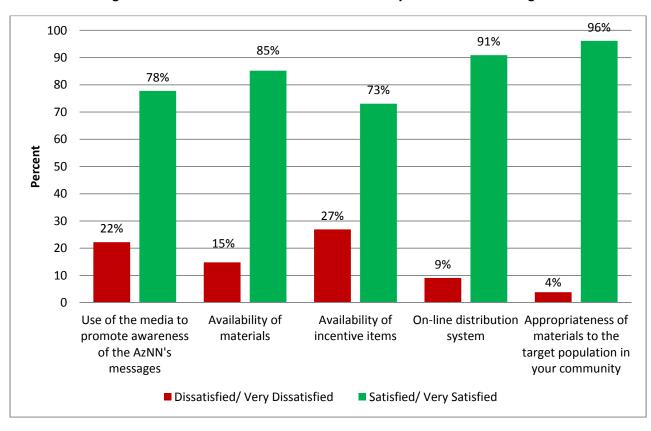


Figure 14: Materials Provided: How satisfied are you with the following?

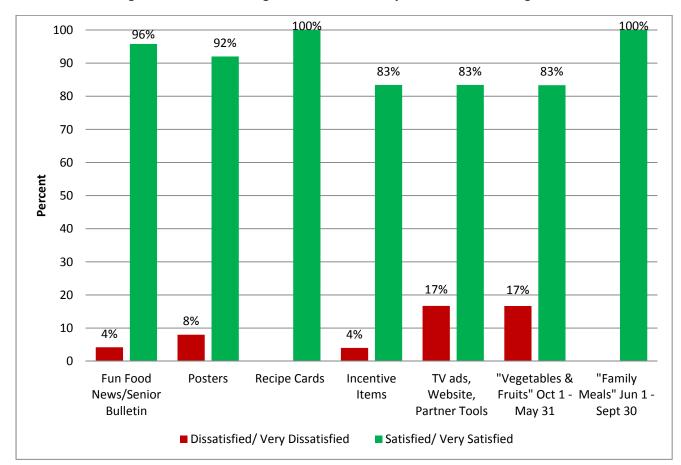


Figure 15: Material Design: How satisfied are you with the following?

Respondents were asked to compare FY14 to FY15 for both material sections. Regarding materials provided, the majority of respondents for each component felt efforts stayed the same. Forty percent of respondents felt the availability of materials had become worse in FY15 when compared to the year before. This is shown in Figure 16. In regards to material design, overall respondents had seen improvements, about 60% across the board. See Figure 17 on the following page.

100 90 79% 76% 80 67% 70 63% 60 Percent 46% 50 38% 40 24% 27% 30 21% 17% 17% 17% 20 4% 7% 10 0 Use of the media Availability of Availability of On-line Appropriateness

incentive items

■ Stayed the same

materials

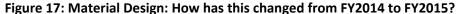
■ Became worse

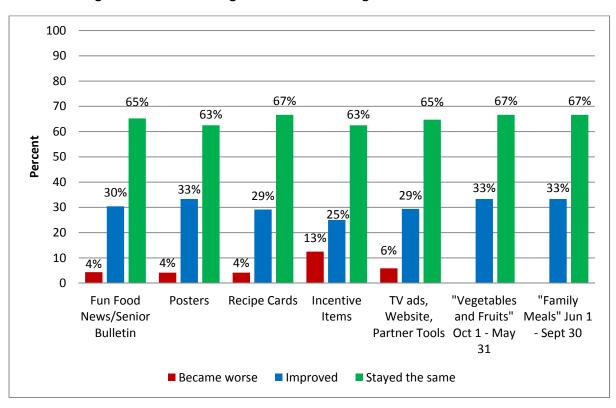
to promote

awareness of the

AzNN's messages

Figure 16: Materials Provided: How has this changed from FY2014 to FY2015?





of materials to the

target population

in your community

distribution

system

Improved

Of the comments regarding materials, respondents felt that the social marketing messages and delivery were good but that there should be more billboards and size of the messaging on the billboards is an issue as well. More incentive availability was suggested. Respondents mentioned issues with availability and cleanliness of inflatables. See Table 8 for unedited comments.

Table 8: Materials Comments

Because of budget cuts, we understand that there will not be the amount of incentives and materials available. I am not sure if Family Meals was a big hit. I didn't feel like it was marketed as heavy as the Vegetables and Fruit Campaign. The costumes were not a problem. The inflatable was never dependable and you could not count on receiving it.

Billboard on 19th Ave and Buckeye (or close, if not the exact address) is in a bad spot, you can't see it from every direction because the stoplight and post for it get in the way.

I love the AzNN materials and advertisements - they are very well done.

I would like to see more incentives and table top games for use at Health Fairs and Community Events.

Inflatable were always dirty, They need to be inspected after use.

Materials on the website are no longer available that were being used in programming (ex. Harvest calendar)

The Bulletin Boards are hard to read and you cannot see the EatWellBeWell.org information. It looks like an ad for Paradise Bakery when you cannot read the captions.

The social marketing campaigns have always been very good. It would be nice to see more billboards/signs in the Northern Region's rural areas.

We miss the days of 4 campaigns so we could provide new materials to partners every quarter.

We received inflatables that we were unable to properly inflate due to holes in the inflatable.

AZNN SUBCOMMITTEES

Of the respondents, nine indicated membership in the Evaluation Subcommittee; seven in the Nutrition Materials Subcommittee; and six were involved in the Physical Activity Subcommittee. Some members selected membership in more than one subcommittee. Twenty-one percent of partners indicated no subcommittee affiliation.

To assess satisfaction with sub-committees, respondents were asked to rate their level of satisfaction in three areas: communication among subcommittee members during subcommittee meetings, communication among subcommittee members outside of subcommittee meetings, and discussion topics or subcommittee projects. Forty-five percent of the respondents were dissatisfied with the communication among subcommittee members outside of subcommittee meetings. Communication among subcommittee members during subcommittee meetings was rated as dissatisfied or very dissatisfied by 33% of respondents. See Figure 18.

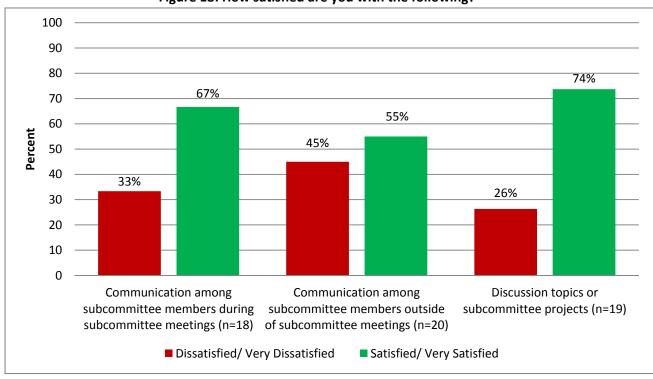


Figure 18: How satisfied are you with the following?

When asked whether the items related to the AzNN Subcommittees had become worse, stayed the same, or improved from FY 2014 to FY 2015, the majority of respondents indicated things had largely stayed the same with almost 60% or more in each category. See Figure 19.

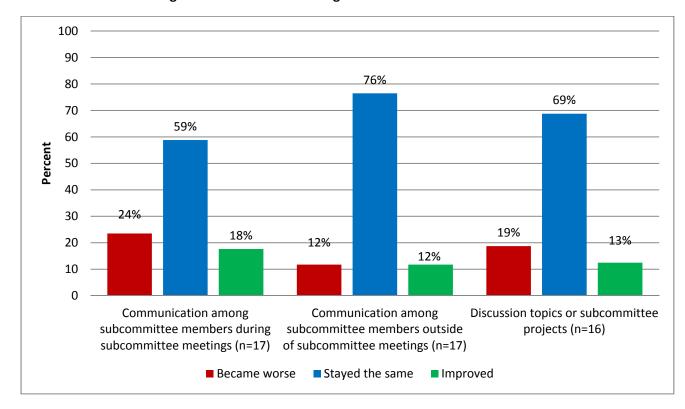


Figure 19: How has this changed from FY2014 to FY2015?

Unedited comments and suggestions for subcommittees are listed in Table 9 below.

Table 9: What, if any, subcommittees should AzNN consider forming?

a subcommittee for ERI now that they will be limited

Food Systems - maybe????

I would suggest renaming the PA subcommittee the Active Living subcommittee to align with the new focus area. It seems like nutrition materials have already pretty much been established for the coming year and most partners are stronger in DE, so perhaps revamping that into a PSEs subcommittee?

Maybe curriculum sub-committees? Finding out resources used to teach the new curriculums

One that focuses on Community Efforts

Until you have more staff, I don't believe we should have any subcommittees. If we did any, I feel that there needs to be a solid evaluation team, that knows what they are doing and tells us what needs to be done. I don't feel that it needs to be a subcommittee. I do feel that we should be interacting with this committee on a monthly basis.

Respondents mentioned subcommittee membership communication needed improvement with more regular meetings and minutes provided to members and the larger group. They also mentioned participation and subsequent discussion is low in meetings. Comments in Table 10 only edited for spelling.

Table 10: AzNN Subcommittee Comments

I don't feel like these committees met enough last year to even comment on them. I was not on any of the sub-committees but I was aware of them and the meetings that were held.

I've been a part of or have been to one of every committee in FY15. Because of all the change, subcommittee members are clueless and ask more questions than there are answers to. There is little direction due the competitive grant cycle and unknown variables that AzNN still has to work out.

In order for curriculum to be effective, resources are needed to be created so a classroom of students can see the information - posters, etc. Or all will need to be put on power points... Reading from a script without visual aids is ineffective for gaining results.

Initially with having a smaller focus group I felt that more was being accomplished and that everyone was participating. This year with the committees being open to anyone who wanted to participate I feel that there is less communication and fewer people participating in the actual meeting.

Many of us feel that the communication between the subcommittees and the rest of the network members/partners is very poor. Minutes and notes should be mailed out to keep the non-committee members informed.

Subcommittee suggestions are not always considered because of USDA regulations. It is good that you meet but ultimately the work of the committee is not making changes.

wasn't on subcommittees in FFY14, wish other contractors would be more chatty during the meetings

CONCLUSION

The results of the FY 2015 partner satisfaction survey identified areas of strengths and areas for improvement. Overall, the partners are mostly satisfied with many of the aspects of the programming offered through the AzNN. Partners are aware that some issues with ADHS are related to the hiring freeze.

Strengths of the AzNN identified by the partners include:

- Competence of staff
- Planning process used to prepare AzNN objectives
- Contractor meetings
- Trainings
- Content in biweekly AzNN update emails
- Material appropriateness/distribution/design

Areas for improvement identified by the partners include:

- Clarity and continuity of TA
- ADHS staff responsiveness and availability
- Material availability
- Subcommittee communications between members both during and outside of meetings