

United States Department of Agriculture

Food and Nutrition

Service

September 30, 2024

Ms. Marsha Stowers Interim Director

Mid-Atlantic Regional Office Division of Family Assistance Policy

West Virginia Department of Human Services

350 Capitol Street Charleston, WV 25301

300 Corporate Blvd Robbinsville, NJ 08691-1598

Dear Ms. Stowers:

We are writing with reference to your agency's Supplemental Nutrition Assistance Program Education (SNAP-Ed) Plan for Federal Fiscal Year (FFY) 2025. We have reviewed the SNAP-Ed Plan and additional information submitted by your staff and West Virginia University, and we are approving your SNAP-Ed Plan effective September 30, 2024.

The allocation from the FFY2025 SNAP-Ed Nutrition Education and Obesity Prevention Grant Program for West Virginia is \$4,120,759. This funding will be available for expenditures over a 2-year period and will not expire until September 30, 2026. Any unobligated balance from the first year may carry over to the second year.

The FFY2025 WV SNAP-Ed proposed program budget is \$4,120,759. SNAP-Ed funding is subject to the availability of Federal funds.

We would like to re-emphasize that as primary grantee, your agency is responsible for resolving issues raised by your sub grantees. If your agency is unable to respond to a question, you should contact this office for a policy determination. Please feel free to contact Amanda Gomes at Amanda. Gomes @usda.gov or (609) 649-7984.

Thank you for your continued commitment to nutrition education.

Sincerely,

That Taylord

DAVID GAGLIARDI

Division Director

Supplemental Nutrition Assistance Program

Mid-Atlantic Region

E-cc: Puffenbarger, A.; McCartney, K.; Lyons, S.; Lockstein, H.; Denson, A.; Jenkins, B.



2025 Annual Plan

West Virginia Department of Human Services (State Agency)

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Target Audience and Needs Assessment

Needs Assessment Process

This needs assessment is an interim update.

Stakeholders engaged in the needs assessment process

West Virginia has high rates of obesity and chronic disease. Primary contributors to those conditions, low intake of fruits and vegetables and high intake of sugar-sweetened beverages, are prevalent across West Virginia, particularly in low-income audiences. These behaviors make ideal targets as they are regularly assessed through BRFSS surveillance, are easily monitored for progress and align with the goals and strategies of West Virginia's strategic plan for combatting obesity and chronic disease.

To address the high rates of chronic disease more effectively and extend the impact of the efforts of SNAP-Ed and partners, WV SNAP-Ed confirms its continued Leadership in the work of the State Nutrition Action Council (SNAC). The council is made up of representatives of state level organizations including WVU Extension Service, Bureau for Public Health, WV SNAP - Department of Human Services (DoHS), the Office of EBT, Department of Education (Office of Child Nutrition, Office of Student Support and Wellbeing,), WIC, Department of Agriculture, Marshall University, Shephard University, Mountaineer Foodbank, Save the Children, Turnrow Farm Collective, KEYS for Healthy Kids, WV Food and Farm Coalition, Oral Health Coalition, WVU Office of Health Services Research, and West Virginia University of Parkersburg. Council representatives will meet quarterly to work strategically on projects to address obesity, nutrition and chronic disease across the state.

In addition to stakeholders at the state level, Health Educators and Nutrition Outreach Instructors partner with local community agencies such as the Boards of Education, Family Resource Networks, Adult Education, Extension/4-H, Parks and Recreation Departments, after school programs and city government to determine the local needs and interests in partnering.

Participant feedback is collected regularly through surveys and program specific focus groups which allow for tailoring of programs to better meet the needs of the target audience.

Process used to determine the State's priority goals and develop objectives and indicators to track progress toward them

The primary behavioral objectives of reduction of sugar sweetened beverages, increased consumption of fruits and vegetables and increased physical activity were chosen based on national level statistics on the relationship of those behaviors to chronic disease and state level statistics showing a need for intervention. Goals were then aligned with Healthy People 2030 goal and objectives to allow for monitoring of progress and evaluation by DoHS. Interventions to address each goal were then selected based on the interest and capacity of the Family Nutrition Program and partners at the state and local level. Evaluation of those interventions is guided by and aligned with the SNAP-Ed evaluation Framework.

Pre and post data on behavioral changes are collected to evaluate individual change. Data is entered into the WebNEERs portal and the percent of change on behaviors related to nutrition and physical activity are assessed quarterly. Health Educators report quarterly on progress with interventions including any PSE changes. Pictures and descriptions of outreach are collected from an internal Facebook page and aggregated with behavioral data into quarterly reports which are shared with partner agencies. National data are reassessed on an annual basis to determine progress towards goals.

Needs Assessment Findings

State-Specific Nutrition and Physical Activity-Related Data on Target Population

Topic	Age Group Range	Finding	Data Source
Obesity	18 to 24	30.0 %	2021 Behavioral Risk Factor Surveillance System
	25 to 34	40.0 %	(applies to all age groups)
	35 to 44	45.0 %	
	45 to 54	48.0 %	
	55 to 64	45.0 %	
	65 to 100	36.0 %	
	13 to 17	27.0 %	
Type 2 diabetes	18 to 100	13.0 %	2021 Behavioral Risk Factor Surveillance System (applies to all age groups)
Hypertension	18 to 100	44.0 %	2017 Behavioral Risk Factor Surveillance System (applies to all age groups)
High cholesterol	20 to 100	40.0 %	2016 Behavioral Risk Factor Surveillance System (applies to all age groups)

Торіс	Age Group Range	Finding	Data Source
Fruit consumption	18 to 100 1 to 5 13 to 17	46.0 less than 1 time daily 40.0 less than 1 daily 10.0 did not eat fruit or drink fruit juice in the 7 days prior to survey	2021 Behavioral Risk Factor Surveillance System (applies to all age groups)
Vegetable consumption	18 to 100 1 to 5 13 to 17	19.0 less than daily 50.0 less than daily 8.0 did not eat vegetables during the 7 days prior to survey	2021 Behavioral Risk Factor Surveillance System (applies to all age groups)
Physical activity behaviors	18 to 100 13 to 17	30.0 no physical activity over the past monthfor exercise 18.0 physically active less than 60 minutes a day	2020 Behavioral Risk Factor Surveillance System (applies to all age groups)
Household food insecurity	0 to 100	14.0 low or very low food security	2021 USDA, Economic Research Service (applies to all age groups)
Other: Sugar Sweetened Beverages	1 to 5 13 to 17	65.0 At least once weekly 31.0 at least 1 soda daily	2021 National Survey of Children's Health (applies to all age groups)

Community Food Access Data

File Attachments: WV Food Access Map 2024.pdf

Demographic Characteristics of SNAP-Ed Target Audiences

The SNAP gross income limit (as a percentage of the Federal Poverty Level): 200%

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424	Native Hawaiian	or Other Design	
4.14	Native Hawaiian	OF LITTIES PACIFIC	riciander

30,002 Other

590,529 White

27,295 Black or African American

1,068 American Indian or Alaska Native

3,891 Asian

Source: American Community Survey, 2021

Age

48,243 76 or older

54,769 Younger than 5

109,149 5-17

331,008 18-59

110,050 60-75

Source: American Community Survey, 2021

Ethnicity

642,224 Not Hispanic/Latino

10,995 Hispanic/Latino

Source: American Community Survey, 2021

Primary language spoken in household

, 3 3 1	
0 Amharic	2,078 Arabic
0 Armenian	21 Cantonese
1,085 Chinese	101 Creole
575,580 English	9 Farsi
360 Filipino	1,118 French
1,088 German	134 Hindi
0 Hmong	1,048 Italian
390 Japanese	0 Khmer
193 Korean	0 Laotian
277 Mandarin	405 Other and unspecified languages

180 Polish

90 Russian

Source: American Community Survey, 2021

554 Pennsylvania German

146 Portuguese

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0 Serbo-Croatian		0 Somali		
11,725 Spanish		195 Telugu		
92 Thai		167 Turkish		
21 Urdu		577 Vietnamese		
Source: American Commu	nity Survey, 2021			
County, Ward, Parish				
6,324 Barbour	33,723 Berkeley	8,402 Boone	5,840 Braxton	6,978 Brooke
37,469 Cabell	3,371 Calhoun	4,416 Clay	2,359 Doddridge	16,896 Fayette
1,987 Gilmer	3,732 Grant	13,071 Greenbrier	8,229 Hampshire	9,135 Hancock
6,424 Hardy	20,951 Harrison	9,646 Jackson	11,996 Jefferson	63,498 Kanawha
6,276 Lewis	9,110 Lincoln	16,470 Logan	18,486 Marion	10,515 Marshall
9,679 Mason	10,903 Mcdowell	25,820 Mercer	7,351 Mineral	12,319 Mingo
34,096 Monongalia	5,074 Monroe	5,142 Morgan	10,591 Nicholas	13,657 Ohio
2,352 Pendleton	2,175 Pleasants	3,524 Pocahontas	9,873 Preston	14,349 Putnam
30,172 Raleigh	9,878 Randolph	3,270 Ritchie	6,925 Roane	4,769 Summers
5,915 Taylor	2,082 Tucker	2,477 Tyler	9,566 Upshur	15,223 Wayne
4,403 Webster	6,059 Wetzel	1,991 Wirt	29,304 Wood	10,335 Wyoming

SNAP Participation

Source: American Community Survey, 2021

County, Ward, Parish

1,581 Barbour	7,348 Berkeley	2,969 Boone	1,594 Braxton	0 Brooke
9,346 Cabell	979 Calhoun	1,429 Clay	611 Doddridge	4,480 Fayette
667 Gilmer	1,004 Grant	3,146 Greenbrier	1,809 Hampshire	3,567 Hancock
1,108 Hardy	4,700 Harrison	2,617 Jackson	2,629 Jefferson	16,809 Kanawha
1,929 Lewis	2,896 Lincoln	4,673 Logan	4,756 Marion	2,424 Marshall
2,547 Mason	3,826 Mcdowell	7,428 Mercer	1,794 Mineral	4,149 Mingo
4,304 Monongalia	952 Monroe	1,101 Morgan	2,987 Nicholas	3,736 Ohio
458 Pendleton	564 Pleasants	760 Pocahontas	2,643 Preston	3,142 Putnam
8,384 Raleigh	2,504 Randolph	947 Ritchie	1,590 Roane	1,683 Summers
1,352 Taylor	480 Tucker	770 Tyler	2,472 Upshur	4,095 Wayne
1,583 Webster	1,589 Wetzel	722 Wirt	7,759 Wood	2,589 Wyoming
Source: Prepopulated from Bi-	Annual County Level SNAP P	articipation and Issuance Data, 2	024. Values may have been adju	usted by the State agency.

Program Access for Diverse Target Audiences

Gaps in geographic reach of SNAP-Ed and related programs for the target audiences

Description of the areas of the State that have a significant number of SNAP-Ed-eligible individuals but little or no current programming from SNAP-Ed or other nutrition programs

The West Virginia Family Nutrition program currently covers 51 out of 55 counties in West Virginia through the work of 41 Health Educators and other strategic partners. Goals for coverage are determined by the number of SNAP recipients in the county. Counties with fewer than 3,000 SNAP recipients are allotted .25-.5 FTE, those with 3,000-6,000 are allotted .5-1 FTE and those with greater than 6,000 are allotted 1-1.5 FTEs. Using this model, FTEs are currently being allotted within those ranges. Despite this, there are areas of the state without a Health Educator. Tyler and Pleasants county are without an educator despite attempts to hire an educator there. These counties are sparsely populated and travel between communities limits the ability to cover multiple counties with one educator. A partnership between FNP and West Virginia University of Parkersburg has been established to provide outreach to those areas by integrating experiential public health learning opportunities for students in education, agriculture and nursing. A similar partnership exists with Marshall University Dietetics Program in the southwestern portion of the state, where several vacancies exist.

File Attachments: WV staffing map.pdf

Factors that limit the geographic reach of SNAP-Ed in the State

The rurality and mountainous terrain of the state are limiting factor for reach as well as limited transportation among the targeted population. Only 9 counties have full access to public transportation. Travel between sites and travel to remote communities limits the time available to serve additional audiences. Issues with attracting qualified candidates for educator positions in rural counties demonstrates the need for more workforce development in those areas.

The SNAP-Ed State agency and implementing agencies can address the identified gaps in the State by:

The West Virginia Family Nutrition program has implemented several strategies for addressing gaps in coverage areas.

The first strategy is use of strategic partnerships in geographic regions that are underserved such as the partnerships with WVU Parkersburg and Marshall University. Additional partnership opportunities are being piloted by having the implementing agency provide training to other community-based organizations to advance the mission of SNAP-Ed. These partnerships are not only strategic because of geographic location, but also in the opportunity to build competency in the workforce using experiential and practice-based opportunities in public health outreach.

The second strategy is to continue virtual and hybrid (some virtual, some in-person) outreach programs that were initiated with COVID but were shown to be effective at expanding reach while maintaining impact. Finally, the WV Family Nutrition Program partners with Extension faculty and staff to implement programs in counties not covered by a SNAP educator.

Other factors affecting program access for diverse target audiences

Description of how SNAP-Ed programming is reaching all groups within its target audiences

SNAP-Ed reaches a high percentage of the target audience through placement of FNP staff at the county level. Currently, there are FNP staff in 41 of the 55 counties in WV. These staff provide in-person direct education and public health initiatives. Due to low numbers of target audience members, low population levels, and/or and geographical barriers, 14 counties do not have a dedicated SNAP-Ed educator. To provide eligible audience members with access to SNAP-Ed programming, WV SNAP-Ed offers online education classes. This resource is also useful for individuals who lack access to transportation to attend classes. SNAP-Ed also offers a variety of public health initiatives that can be participated in online.

West Virginia has very low racial and ethnic diversity. 90.4% of the target population is white. 88% of the target audience speaks English as their primary language, 1.8% speak Spanish. Other languages are represented by 0.3% or fewer percent of the SNAP population. WV SNAP-Ed provides direct education program materials in English and Spanish. Collaboration with a variety of organizational partners including childcare centers, schools, community centers, workforce training centers, senior centers, and grandparent support groups enables SNAP-Ed to reach its target audience across age groups.

Key factors supporting access to SNAP-Ed programming for each of these groups

Current outreach and recruitment strategies rely on both traditional methods (word of mouth, public calendars, recruitment flyers) and newer methods including social media posts across multiple platforms (TikTok, Instagram, and Facebook). In rural areas of West Virginia without local news stations or newspapers, social media is an effective method of communicating with residents. SNAP-Ed staff collaborate with local partners and organizations that assist with outreach and recruitment across a wide variety of population sub-groups that include addiction recovery centers, workforce development centers, and grandparent classes.

Transportation issues are supported through provision of online classes, and by providing programming at everyday places and locations that people already visit like schools, daycares, libraries, retail outlets, farmers markets, workforce training centers, recovery centers and churches. 89.8% of the eligible WV SNAP audience is provided with materials in their primary language. SNAP-Ed administration has contacts at other implementing agencies who provide additional language materials as needed.

Classes are provided at community accessible spaces that have physical disability accommodations in place, such as schools and libraries. Additional accommodations are provided as needed. DoHS employs a full-time Americans with Disabilities Act (ADA) Coordinator responsible for ensuring all individuals regardless of disability status have access to all WV SNAP programming, which includes SNAP-Ed.

Key factors limiting access to SNAP-Ed programming

West Virginia's geography creates barriers to participation. Many residents live in rural or frontier counties that require significant travel distance to participate in SNAP-Ed activities. Low population combined with large geographic distances create staffing challenges, as staff would have to cover great distances to reach small pockets of population. Virtual classes are offered state-wide, but West Virginia suffers from broadband access issues, due to income barriers or geographic barriers. The mountainous and dispersed geography and low population results in lack of public transportation in most of the state. Due to the homogeneity of West Virginia's population, language barriers are a smaller issue.

The State agency and implementing agencies can address the above limiting factors by:

Transportation issues are beyond the scope of the implementing agency, but they can continue to provide outreach at everyday places already accessed by community members and schedule outreach events and programming at times that correspond with other activities so participants can combine trips and access multiple needs with one trip. Additionally, the implementing agency surveys participants about preferred times and locations of SNAP-Ed programming to identify opportunities to increase ability to participate. Surveys are posted quarterly and available on social media.

Program appropriateness for diverse target audiences

Strengths of current SNAP-Ed programming regarding its appropriateness for target audiences

Current SNAP-Ed delivery methods, materials, and messages in West Virginia are designed to meet the target audiences' financial resources, food access, and cultural food preferences. Delivery of programming is provided at a variety of sites that the target audience visit as part of their everyday activities and have comfort in attending, like food pantries, churches, schools, community centers, daycare centers, after school programs, and recovery programs. Outreach and communication with the target audience utilizes a variety of communication methods and techniques to reach a broad audience. A combination of traditional communications and updated methods (text messages, reels, videos, social media across multiple platforms) create multiple venues to share information about SNAP-Ed's programs and offerings. SNAP-Ed implementing agency administration and staff build partnerships with community level and state-level organizations that serve the same audiences and have the same overarching goals. Local community-level partnerships result in increased acceptance and comfort between the target audience and the program activities provided. Focusing on partnerships at the local and state level with organizations with parallel goals allows these collaborations to strengthen their outreach, recruitment, and impact.

Weaknesses of current SNAP-Ed programming regarding its appropriateness for target audiences

Currently SNAP-Ed programming's biggest weakness lies in the challenges experienced by the target population. Individuals who qualify for SNAP often have issues with broadband access, transportation, and child care arrangements. Adult direct education classes that require 6 - 8 lessons lasting 1.5 hours each creates an almost insurmountable barrier for the target audience to complete. Combined in-person and virtual options could potentially address this issue.

The SNAP-Ed State agency and implementing agencies can address weaknesses related to the appropriateness of programming for its target audiences by:

SNAP-Ed implementing agencies can continue to seek creative and innovative ways to address the appropriateness of SNAP-Ed programming to its target audience. Processes are in place (participant feedback through surveys and interviews, asking for feedback via popular communication methods like social media; instructor feedback, and suggestions based on implementation barriers they experience) for continual improvement and strengthening the appropriateness of SNAP-Ed programs. The state agency and implementing agency can continue to advocate for improvements to the SNAP-Ed system through national meetings, conferences, and communication efforts.

Tribal Consultation

NA

Primary Contact

NΑ

Contact Title

NA

Description of the outcome of the consultation and how it impacted the SNAP-Ed plan

At the time of plan submission, no federally recognized tribal nations currently reside within WV borders.

Description of written comments received and outcome

Coordination and Partnerships With Programs and Organizations From Multiple Sectors

Strengths of coordination and partnerships among SNAP-Ed and other nutrition education, obesity prevention, and health programs and organizations from multiple sectors

To address the high rates of chronic disease more effectively and extend the impact of the efforts of SNAP-Ed and partners, WV SNAP-Ed has facilitated the State Nutrition Action Council (SNAC). The council is made up of representatives of state level organizations including WVU Extension Service, Bureau for Public Health, Department of Human Services, Office of EBT, Department of Education (Office of Child Nutrition, Office of Student Support and Wellbeing,), WIC, Department of Agriculture, Marshall University, Mountaineer Foodbank, Save the Children, KEYS for Healthy Kids, WV Food and Farm Coalition, Oral Health Coalition, WVU Office of Health Services Research, West Virginia Food Justice Lab, and West Virginia University of Parkersburg who will meet quarterly to work strategically on projects to address obesity, nutrition and chronic disease across the state. In addition to state level agency partnerships, the West Virginia Family Nutrition program partners extensively with local farmers across the state to distribute fruits and vegetables to children and families participating in kids markets at schools, stores and in coordination with healthcare agencies and clinics.

Important areas for improved coordination and partnerships among SNAP-Ed and other nutrition education, obesity prevention, and health programs and organizations from multiple sectors

There are opportunities for improved coordination between partners in schools and healthcare clinics in addressing obesity in children. In the 2023-2024 school year, the WV CARDIAC Project screened over 12,000 kindergarten, 2nd grade and 5th grade students across 26 counties. Half of the 5th grade students were overweight or obese and over 30% were identified as overweight or obese in kindergarten. School nurses and PE/Health teachers can be allies in providing support to students and families in addition to healthcare providers in coordination with support from healthcare professionals. SNAP-Ed educators can serve as a link between the school, healthcare and home environments by offering support directly to families in addition to that provided elsewhere.

Efforts are already underway to link existing resources to provide training and coordination among these groups to better support families struggling with obesity. This work will additionally be supported in the state through a 5-year High Obesity Program CDC grant.

Agency/Workforce Capacity

Strengths of the SNAP-Ed workforce at the State and implementing agency levels for program planning, implementation, and evaluation

The WV Family Nutrition Program (FNP) is co-directed by Kristin McCartney and Gina Wood who are both Registered Dietitians and have master's in public health. They have a broad understanding of nutrition and how to implement and evaluate programs as well as understand the culture of the state and barriers faced by rural communities. They have extensive and diverse partnerships throughout the state which contribute to program planning and implementation. In addition, there is a staff of around 40 educators who serve 41 counties across the state. While the educators have diverse education backgrounds, they have all received extensive training in nutrition and public health with many of them having at least 5 years of experience in the implementation of PSE outreach.

FNP also has diversified the workforce through strategic partnerships across the state which are aimed at not only providing support to the target audience, but also opportunities for future teachers and healthcare professionals to gain experience in nutrition and obesity prevention outreach. Gina and Kristin also serve as preceptors for nutrition and public health students and support education of other healthcare professionals as a part of AHEC programs.

Needs of the SNAP-Ed workforce at the State and implementing agency levels for program planning, implementation, and evaluation

There is greater opportunity for the state and implementing agency to coordinate on job placement, potentially through SNAP E&T. Hiring in small, rural communities has served as a barrier to SNAP-Ed, but better coordinator with workforce programming may offer broader opportunities for placement of the target audience into roles within the SNAP-Ed program. This coordination requires ongoing communication prior to implementation.

Selected State Priority Goals Based on Needs Assessment

PRIORITY GOAL 1

Healthy People 2030 Goal PA-09: Increase the number of children who do enough aerobic physical activity.

Goal Type(s)

- · Collaborate with multiple sectors
- · Improve health behaviors
- · Improve policies, systems, or environment of settings

PRIORITY GOAL 2

Healthy People 2030 NWS-10: Reduce consumption of added sugars by people aged 2 years and over.

Goal Type(s)

· Improve health behaviors

PRIORITY GOAL 3

Healthy People 2030 Goal NWS-04: Reduce the proportion of children and adolescents with obesity.

Goal Type(s)

- · Improve SNAP-Ed access
- Expand or strengthen coordination and collaboration with other programs
- · Collaborate with multiple sectors
- · Strengthen workforce capacity
- · Develop/strengthen innovations in programming

PRIORITY GOAL 4

Healthy People 2030 Goal PA-01: Reduce the proportion of adults who do no physical activity in their free time

Goal Type(s)

· Improve health behaviors

PRIORITY GOAL 5

Healthy People 2030 Goal PHI-R02: Expand public health pipeline programs that include service or experiential learning.

Goal Type(s)

- · Strengthen workforce capacity
- Expand or strengthen coordination and collaboration with other programs

PRIORITY GOAL 6

Healthy People 2030 Goal NWS-01: Reduce household food insecurity and hunger.

Goal Type(s)

- · Improve policies, systems, or environment of settings
- · Improve multisector outcomes
- · Improve SNAP-Ed access
- Expand or strengthen coordination and collaboration with other programs
- · Collaborate with multiple sectors
- · Develop/strengthen innovations in programming

PRIORITY GOAL 7

Healthy People 2030 Goal NWS-06 & 07: Increase consumption of fruits and vegetables by people aged 2 years and over.

Goal Type(s)

· Improve health behaviors

Action Plans

This is a **single-year plan**.

Priority Goals

PRIORITY GOAL 1

Healthy People 2030 Goal PA-09: Increase the number of children who do enough aerobic physical activity.

Goal Types

- · Collaborate with multiple sectors
- · Improve health behaviors
- · Improve policies, systems, or environment of settings

SMART Objectives

Support school-based walking programs in at least 5 schools by September 30, 2025.

SNAP-Ed Evaluation Framework Indicators: Physical Activity & Reduced Sedentary Behavior (MT3)

Other Performance Indicators: MT3f. Walking steps during period assessed (e.g., increasing daily goal by ≥2,000 steps)

Support installation of at least 10 Active Pathways to prompt physical activity in school and community environments.

SNAP-Ed Evaluation Framework Indicators: Physical Activity and Reduced Sedentary Behavior Supports (MT6)

Other Performance Indicators: MT6c. Incorporating physical activity into the school day or during classroom-based instruction (h)., MT6e. Signage and prompts for use of walking and bicycling paths (n)

Promote increased classroom activity time through the integration of Active Academics in at least 100 classrooms by September 30, 2025.

SNAP-Ed Evaluation Framework Indicators: Physical Activity & Reduced Sedentary Behavior (MT3), Physical Activity and Reduced Sedentary Behavior Supports (MT6)

Other Performance Indicators: MT3e. Recess, lunchtime, classroom, before/after school physical activities (school activities—non-PE)., MT6c. Incorporating physical activity into the school day or during classroom-based instruction (h).

PRIORITY GOAL 2

Healthy People 2030 NWS-10: Reduce consumption of added sugars by people aged 2 years and over.

Goal Types

· Improve health behaviors

SMART Objectives

Support Rethink Your Drink, a social marketing and educational campaign encouraging consumption of water and reduction of sugar sweetened beverages statewide throughout fiscal year 2025.

SNAP-Ed Evaluation Framework Indicators: Healthy Eating Behaviors (MT1), Nutrition Supports (MT5), Social Marketing (MT12)

Other Performance Indicators: MT 1i. Drinking milk, MT 1g. Drinking water, MT 1h. Drinking fewer SSB, MT5c. Improvements in free water access, taste, quality, smell, or temperature (H)., MT 12a. Number of counties with campaign., MT 12b. # of people who received on-the-ground, direct or indirect education/promotion as part of social marketing campaigns.

PRIORITY GOAL 3

Healthy People 2030 Goal NWS-04: Reduce the proportion of children and adolescents with obesity.

Goal Types

- Improve SNAP-Ed access
- · Expand or strengthen coordination and collaboration with other programs
- · Collaborate with multiple sectors
- · Strengthen workforce capacity
- · Develop/strengthen innovations in programming

SMART Objectives

Complete BMI and Acanthosis Nigricans (AN) screening in kindergarten, 2nd and 5th grade students in at least 25 counties by September 20, 2025.

SNAP-Ed Evaluation Framework Indicators: Health Care Clinical-Community Linkages (MT11)

Other Performance Indicators: MT11b.Number of health centers that provide screening and follow-up for adolescent weight status., MTe. Estimated number of people in the target population who have increased access to or benefit from the community health policy or intervention.

Provide 5210 training and technical assistance to at least 100 healthcare professionals and 10 clinics.

SNAP-Ed Evaluation Framework Indicators: Health Care Clinical-Community Linkages (MT11)

Other Performance Indicators: MT11a. Community resource capacity to deliver preventive services., MTe. Estimated number of people in the target population who have increased access to or benefit from the community health policy or intervention.

Establish a referral system between schools and healthcare professionals in at least 5 counties for students identified as overweight, obese and/or screen positive for Acanthosis Nigricans (AN).

SNAP-Ed Evaluation Framework Indicators: Organizational Partnerships (ST7), Health Care Clinical-Community Linkages (MT11)

Other Performance Indicators: MT11b.Number of health centers that provide screening and follow-up for adolescent weight status., MTe. Estimated number of people in the target population who have increased access to or benefit from the community health policy or intervention., ST7a. The number of active partnerships in SNAP-Ed qualified sites or organizations that regularly meet, exchange information, and identify and implement mutually reinforcing activities that will contribute to adoption of one or more organizational changes or policies., ST7b. Description of the depth of the relationship (network, cooperator, coordination, coalition, collaboration) ST7c. Description of partnership accomplishments and lessons learned.

PRIORITY GOAL 4

Healthy People 2030 Goal PA-01: Reduce the proportion of adults who do no physical activity in their free time

Goal Types

· Improve health behaviors

SMART Objectives

Support walking and physical activity programs for adults in at least 5 counties by September 30, 2025.

SNAP-Ed Evaluation Framework Indicators: Physical Activity and Reduced Sedentary Behavior Supports (MT6)
Other Performance Indicators: MT3a. Physical activity and leisure sport (general physical activity or leisure sport)

PRIORITY GOAL 5

Healthy People 2030 Goal PHI-R02: Expand public health pipeline programs that include service or experiential learning.

Goal Types

- · Strengthen workforce capacity
- Expand or strengthen coordination and collaboration with other programs

SMART Objectives

Provide at least 50 students with service/experiential learning experiences as a way of meeting educational requirements of their degree.

SNAP-Ed Evaluation Framework Indicators: None

Other Performance Indicators: Development of public health workforce.

PRIORITY GOAL 6

Healthy People 2030 Goal NWS-01: Reduce household food insecurity and hunger.

Goal Types

- · Improve policies, systems, or environment of settings
- · Improve multisector outcomes
- Improve SNAP-Ed access
- · Expand or strengthen coordination and collaboration with other programs
- · Collaborate with multiple sectors
- · Develop/strengthen innovations in programming

SMART Objectives

Train a minimum of 75 food policy advocates in the development of food security councils by September 30, 2025

SNAP-Ed Evaluation Framework Indicators: Food Systems (LT12)

Other Performance Indicators: Food policy councils: Number of local food policy councils that adopt policies and/or conduct new activities specifically addressing food system disparities within the geographic areas they cover

Generate, disseminate and maintain a web-based platform of food security data that can inform and ignite food security efforts at the state and local level.

SNAP-Ed Evaluation Framework Indicators: Government Policies (MT7)

Other Performance Indicators: Number or percentage of governmental jurisdictions that create public-private partnerships to provide incentives for the local production and distribution of food (i.e., food grown within a day's driving distance of the place of sale)2, MT7f. Estimated number of people in the target population who have increased access to or are protected by the government policy or intervention: Total number of persons in the census-defined area(s) Number and proportion of persons who are SNAP-Ed eligible

Provide support for and retain 35 existing SNAP Stretch location and add 8 additional locations by September 30, 2025

SNAP-Ed Evaluation Framework Indicators: Agriculture (MT8), Agricultural Sales and Incentives (LT14)

Other Performance Indicators: MT8b.Number of farmers markets that offer SNAP-bonus incentive programs. MT8e.Estimated number of people in the target population who have increased access to or benefit from the agricultural policy or intervention., LT14e.Total dollar value of incentives redeemed by SNAP participants for purchase of targeted food items at farmers markets during the period assessed.

PRIORITY GOAL 7

Healthy People 2030 Goal NWS-06 & 07: Increase consumption of fruits and vegetables by people aged 2 years and over.

Goal Types

· Improve health behaviors

SMART Objectives

Support kids markets in at least 10 counties by September 30th, 2025

SNAP-Ed Evaluation Framework Indicators: Agriculture (MT8), Agricultural Sales and Incentives (LT14)

Other Performance Indicators: MT8cNumber of school districts that participate in farm-to-school activities., LT14b. Total dollars invested by SNAP-Ed eligible school districts in local food purchases during the period assessed

Enroll at least 3000 families in the Kids Market @theStore program by September 30, 2025.

SNAP-Ed Evaluation Framework Indicators: Healthy Eating Behaviors (MT1), Commercial Marketing of Healthy Foods and Beverages (LT18)

Other Performance Indicators: LT18eRetail food stores: Number of retail food stores that have established marketing practices that promote the choice of healthier foods and beverages. These may include, but are not limited to, in-store merchandising, labeling, promotion, and family-friendly placements (including check-out lanes) that intentionally encourage the choice of foods/beverages-to-encourage; partnerships with SNAP-Ed projects to support community marketing events; and projects to support consumer uptake of foods/beverages-to-encourage., MT1m. Cups of vegetables consumed per day., MT1f. Cups of fruit consumed per day.

Support Grow This!, a home gardening social marketing and community outreach program to all 55 counties throughout FY25.

SNAP-Ed Evaluation Framework Indicators: Nutrition Supports (MT5), Social Marketing (MT12), Food Systems (LT12)

Other Performance Indicators: MT 12b. # of people who received on-the-ground, direct or indirect education/promotion as part of social marketing campaigns, O. Collecting excess wholesome food to donate to charitable organizations.

Support Food of the Month promotions in at least 30 counties by September 30th, 2025.

SNAP-Ed Evaluation Framework Indicators: Nutrition Supports (MT5), Social Marketing (MT12)

Other Performance Indicators: MT5c.systems changes/prioritizing farm to table/increase in fresh local produce, MT5e marketing/point of purchase distribution prompts(s),MT5f. Reach: Total potential number of persons who encounter the improved environment or are affected by the policy change on a regular (typical) basis and are assumed to be influenced by it.

Establish and/or maintain at least 30 edible gardens in schools, communities and child-care centers across the state throughout FY25.

SNAP-Ed Evaluation Framework Indicators: Nutrition Supports (MT5), Food Systems (LT12)

Other Performance Indicators: MT5d environmental changes. Edible gardens (establish, reinvigorate or maintain food gardens (p), LT12g.Resident-friendly neighborhood food infrastructure: Number of jurisdictions that provide assistance to establish, maintain, and/or expand community gardens, urban agriculture, and/or farmers market access in under-served areas. May include changes in zoning, land use, and water or electricity assistance.

Maintain support for 30 produce prescription/Farmacy programs and support establishment of 10 additional programs by September 30, 2025.

SNAP-Ed Evaluation Framework Indicators: Healthy Eating Behaviors (MT1), Health Care Clinical-Community Linkages (MT11)

Other Performance Indicators: MT11b. Number of health centers that provide screening and follow-up for food security status adult weight status., MT11c. Number of health centers that give families innovative prescriptions or vouchers for fruits and vegetables., MT11e. Estimated number of people in the target population who have increased access to or benefit from the community health policy or intervention., MT1I. Cups of fruit consumed per day., MT1m. Cups of vegetables consumed per day.

Projects Linked to the State Objectives

Project Name/Title	Agency Conducting Project	SMART Objective(s) to be Addressed
CARDIAC	WV Family Nutrition Program - WVU (Implementing Agency)	 Complete BMI and Acanthosis Nigricans (AN) screening in kindergarten, 2nd and 5th grade students in at least 25 counties by September 20, 2025. Provide 5210 training and technical assistance to at least 100 healthcare professionals and 10 clinics. Establish a referral system between schools and healthcare professionals in at least 5 counties for students identified as overweight, obese and/or screen positive for Acanthosis Nigricans (AN).
Kids Market @ The Store	WV Family Nutrition Program - WVU (Implementing Agency)	Enroll at least 3000 families in the Kids Market @theStore program by September 30, 2025.
Produce Prescriptions	WV Family Nutrition Program - WVU (Implementing Agency)	 Maintain support for 30 produce prescription/Farmacy programs and support establishment of 10 additional programs by September 30, 2025.
Kids Markets	WV Family Nutrition Program - WVU (Implementing Agency)	Support kids markets in at least 10 counties by September 30th, 2025
Food Policy Councils	WV Family Nutrition Program - WVU (Implementing Agency)	 Train a minimum of 75 food policy advocates in the development of food security councils by September 30, 2025 Generate, disseminate and maintain a web-based platform of food security data that can inform and ignite food security efforts at the state and local level.
SNAP Stretch	WV Family Nutrition Program - WVU (Implementing Agency)	 Provide support for and retain 35 existing SNAP Stretch location and add 8 additional locations by September 30, 2025
Rethink Your Drink	WV Family Nutrition Program - WVU (Implementing Agency)	 Support Rethink Your Drink, a social marketing and educational campaign encouraging consumption of water and reduction of sugar sweetened beverages statewide throughout fiscal year 2025.
Edible Gardens	WV Family Nutrition Program - WVU (Implementing Agency)	 Support Grow This!, a home gardening social marketing and community outreach program to all 55 counties throughout FY25. Establish and/or maintain at least 30 edible gardens in schools, communities and child-care centers across the state throughout FY25.
Grow This!	WV Family Nutrition Program - WVU (Implementing Agency)	 Support Grow This!, a home gardening social marketing and community outreach program to all 55 counties throughout FY25.
Harvest of the Month	WV Family Nutrition Program - WVU (Implementing Agency)	Support Food of the Month promotions in at least 30 counties by September 30th, 2025.
Direct Nutrition Education	WV Family Nutrition Program - WVU (Implementing Agency)	 Provide at least 50 students with service/experiential learning experiences as a way of meeting educational requirements of their degree.
Adult and Youth Physical Activity	WV Family Nutrition Program - WVU (Implementing Agency)	 Support school-based walking programs in at least 5 schools by September 30, 2025. Support installation of at least 10 Active Pathways to prompt physical activity in school and community environments. Promote increased classroom activity time through the integration of Active Academics in at least 100 classrooms by September 30, 2025.

Project Name/Title

Agency Conducting Project

SMART Objective(s) to be Addressed

 Support walking and physical activity programs for adults in at least 5 counties by September 30, 2025.

Nonproject Activities Linked to the State Objectives

No data submitted

SNAP-Ed Outreach

Methods that the State agency will use to notify SNAP applicants, participants, and eligible individuals of the availability of SNAP-Ed activities. Including a description of any specific target groups for these outreach efforts and, if relevant, how SNAP-Ed is working with State and local SNAP offices to reach participants and applicants.

In FY25 the state agency will work with the implementing agency on promoting SNAP-Ed messaging and programming by streaming educational videos and program promotions in county assistance offices. In addition, Community Service Managers who oversee county assistance offices, will participate in professional development activities so they are more familiar with SNAP-Ed programming and can share information and opportunities for promotion with county staff.

To support programs related to increased fruit and vegetable consumption, West Virginia maintains a comprehensive list of participating farmer's markets made public for our SNAP clients. WV provides public messaging through social media and our bureau website that highlights available SNAP-Ed programming. During Summer EBT implementation the state agency will consistently remind SNAP households about opportunities through double-up buck programs. West Virginia is committed to increasing the public awareness of SNAP-Ed and food nutrition as a whole.

In 2025 the Department of Human Services will mail information related to farmer market access and double-up buck programs in SNAP approval eligibility letters. This will be a coordinated effort with the state agency, the implementing agency, and the Food and Farm Coalition.

Additionally, in FY25 the state SNAP Outreach implementing agency, Catholic Charities will begin work to disseminate nutrition education materials produced through the SNAP-Ed program. This outreach effort will target individually newly introduced to SNAP to make healthier choices from the onset of SNAP approval.

Action Plan Overview

Overview of how the planned SNAP-Ed efforts across implementing agencies and subgrantees fit together to address the target audiences' needs, accomplish SMART objectives, and complement other programs in the State to support individuals and families with low incomes in improving their healthy eating and physical activity behaviors.

The efforts of the WV SNAP-Ed program focus on decreasing obesity by focusing on three primary health outcomes:

1. Increasing consumption of fruits and vegetables, 2. Decreasing consumption of sugar sweetened beverages and 3. Increasing activity levels.

This work is accomplished both by providing direct nutrition education to adults and youth to increase knowledge, skills and attitudes and through environmental, systems and policy level approaches that aim to facilitate and promote adoption of healthy behaviors. A majority of this works has focused on food systems development by engaging farmers in the direct delivery of fruits and vegetables to targeted audiences through program like Kids Markets, Kids Market @ the Store and FARMacy/Produce Prescriptions. SNAP Stretch, a nutrition incentive program, also facilitates increased buying power for SNAP recipients at farmers markets and other local retailers. This work is facilitated through partnerships with the West Virginia Food and Farm Coalition, The West Virginia University of Parkersburg Agriculture program and the West Virginia Food Justice Lab. Preventing and providing more effective childhood obesity treatment requires integration between healthcare and community environments and schools. Partnerships with the CARDIAC Project, KEYS for Healthy Kids

and health professions students at WVU Parkersburg and across the state are creating opportunities to connect screening and referral systems as well as create integrated teams of school nurses, PE teachers, healthcare providers and SNAP Educators to support high risk individuals. Campaigns like Grow This!, Food of the Month and Rethink Your Drink are adopted across partnerships to increase awareness, educate and engage audiences in positive health behaviors. The State Nutrition Action Council offers an opportunity to disseminate and inform a broad range of state agencies on the work of SNAP-Ed and offers opportunities for synergies among agencies.

Planned Projects and Activities

WV Family Nutrition Program - WVU (Implementing Agency) Projects and Activities

CARDIAC

This project is entering year 7 of implementation

Project Description

The WV CARDIAC Project began in 1998 and quickly became the first statewide initiative to conduct school-based health screenings in school-age children, primarily those in the 5th, 2nd, and K grades. The WV CARDIAC Project provides the largest data set of children's health status of any state in the country. Since its inception in 1998, CARDIAC has screened over 220,000 students (K, 2, 5, 8,9) in the school setting in all 55 counties in West Virginia. Compared to other surveillance data sets, such as NHANES which screens about 1% of the population, the CARDIAC Project consistently screens 30-40% of all 5th grade children in our state, and approximately 80% of kindergarten and 2nd grade students.

For each child screened, results are sent to parent-identified primary care providers. For example, across the 2016-17 school year, 1706 letters were mailed to WV physicians informing them of a child's health status as identified by the CARDIAC screenings. In addition to informing WV parents and family physicians about an individual child's health status, CARDIAC Project data are used to measure progress in our state on children's health, inform state and local agencies on county and regional status, and justify the need in WV for external grants and other funding opportunities.

Financial support from the West Virginia legislature funded the operational cost of conducting the program until July 2017. SNAP-Ed has provided funding for specific aspects of CARDIAC since 2019, continuing one of the most robust comprehensive public health programs in West Virginia and across the nation. All biometric measurements other than height and weight (for the purpose of determining BMI) and Acanthosis Nigricans, will be done by medical students, CARDIAC Staff or clinicians and will not be funded by SNAP-Ed.

Linked SMART Objectives

- Complete BMI and Acanthosis Nigricans (AN) screening in kindergarten, 2nd and 5th grade students in at least 25 counties by September 20, 2025.
- Provide 5210 training and technical assistance to at least 100 healthcare professionals and 10 clinics.
- Establish a referral system between schools and healthcare professionals in at least 5 counties for students identified as overweight, obese and/or screen positive for Acanthosis Nigricans (AN).

Project Outreach

Low-income schools in select counties will be targeted to participate in the CARDIAC screening. Parents of students in kindergarten, 2nd and 5th grade in those schools will receive information about the screening and will have the opportunity to opt-out.

Settings and Approaches

Direct Education

Direct Ed Stages: This project does not include direct education

PSE Initiatives

PSE Stages: Implementing changes, Maintaining changes, Conducting follow-up assessments, evaluation, and/or monitoring

Settings

- Schools (K-12, elementary, middle, and high) (0 tribal / 130 rural / 150 total)
- Healthcare clinics and hospitals (0 tribal / 5 rural / 10 total)

Priority Populations

Priority Age Groups Priority Racial Groups **Priority Ethnic Groups Priority Gender Groups** 5-7 (or grades K-2) No ethnic group priority · No racial group priority No gender group priority • 8-10 (or grades 3-5)

Interventions

SNAP-Ed Interventions (Formerly Toolkit Interventions) No data submitted

Previously Developed Interventions

CARDIAC Kinder

Approved for use by FNS.

Adapted for this project:

This program expands the CARDIAC approach beyond kindergarten to also include 2nd and 5th grade screenings. The scope of the work will also be expanded to include outreach to school nurses, PE teachers and healthcare professionals to provide comprehensive support to children identified at high risk for diabetes. The goal is to create a team-based approach which is integrated through the work of the SNAP-Educator.

Research tested: National Cancer Institute: Research-Tested Interventions Program [Read more]

New Interventions No data submitted

Kids Market @ The Store

This project is entering year 5 of implementation

Project Description

Kids Market @ The Store is a program created by the WVU (West Virginia University) Extension Family Nutrition Program that allows kids to "shop" for free fruits and vegetables at retail locations in their counties. The program is open to all children aged 2 - 17. Each child receives a market bag and a passport, and each family gets up to \$60 in tokens. The program prioritizes local stores and, when possible, participating stores feature a Kids Market fresh fruits and vegetables grown by West Virginia farmers. Kids "shop" from this display using KM@TS tokens. Parents/guardians are provided stickers to help their child track which fruits and vegetables they have purchased. At the end of the program, kids show their passports to store staff or WVU educators for WVUbranded prizes. Participating families have the opportunity to receive a weekly e-mail newsletter or to join a county specific, closed Facebook page to receive information on what is available at the store, recipes and other virtual education materials. Families have an opportunity to sign up for free family-based, virtual nutrition education from the Family Nutrition Program, and receive a copy of "I Love Vegetables," a family-friendly guide to buying, storing, and cooking fresh produce.

In FY25, in addition to an evaluation of changes in fruit and vegetable consumption and other mealtime behaviors, the FNP team plans to integrate the use of a veggie meter. In the first year of the Kids Market program, the Veggie Meter would be used during packet pickup for children who choose to test themselves. Upon arrival, a health educator would introduce the Veggie Meter, explaining its purpose and the process of measuring carotenoid levels in the skin as an indicator of vegetable intake. Children would have the opportunity to use the Veggie Meter, receiving immediate feedback on their current levels.

The health educator would record these initial readings if the parent and child wish for it to be recorded, and then again at the end of the program, to assess changes in carotenoid levels as a biomarker of vegetable consumption.

Linked SMART Objectives

• Enroll at least 3000 families in the Kids Market @theStore program by September 30, 2025.

Settings and Approaches

Direct Education Direct Ed Stages: Implementing, Evaluating Provided in English

PSE Initiatives

PSE Stages: Implementing changes, Maintaining changes, Conducting follow-up assessments, evaluation, and/or monitoring

Settings

Small food stores (up to three registers) (0 tribal / 25 rural / 30 total)

Social Marketing Campaigns

Priority Populations

Priority Age Groups	Priority Racial Groups	Priority Ethnic Groups	Priority Gender Groups
 Younger than 5 5-7 (or grades K-2) 8-10 (or grades 3-5) 11-13 (or grades 6-8) 14-17 (or grades 9-12) 	No racial group priority	No ethnic group priority	No gender group priority

Interventions

SNAP-Ed Interventions (Formerly Toolkit Interventions)

No data submitted

Previously Developed Interventions

Healthy Corner Stores

Approved for use by FNS.

Adapted for this project:

Kids Market at the Store is based on the same principles as Healthy Corner Stores, a USDA initiative focusing on adding healthy options at small, local shops.

Healthy Corner Stores- Making Corner Stores Healthier Places to Shop-USDA

The intervention has been adapted to West Virginia and focuses on children aged 2-17.

Research tested: U.S. Department of Health and Human Services: Rural Obesity Prevention Toolkit [Read more]

New Interventions

No data submitted

Produce Prescriptions

This project is entering year 6 of implementation

Project Description

A produce prescription program (PPP) is medical treatment involving a written prescription by a health care provider to help eligible patients prevent or manage diet-affected health conditions. Prescriptions are redeemed for fruits and vegetables with a partnering producer such as a retail outlet or farmer's market, and programs may also include a series of nutrition education and culinary instruction sessions. PPPs are one method of coordinating the delivery of health care with public health and community-based programs thereby improving access to preventive and chronic care services. Evidence suggests that PPPs can improve food security and management of chronic conditions, and also have the potential to reduce health care costs.

The FARMacy WV program which began in 2016 is a 15-week program that provides free fruits and vegetables to people with chronic diseases like diabetes, who also might also find it challenging to eat healthfully on a budget. A medical provider screens patients for eligibility, refers them to the program and writes a prescription for the produce, so it is a part of their formal medical care. Referred participants attend a pop-up farmer's market each week at their clinic where they interact with clinic staff, farmers, and also participate in a series of 6 of nutrition education and cooking instruction sessions with their WVU FNP educator. Pre and post clinical measures and surveys are also collected and housed in a HIPAA-compliant database.

Linked SMART Objectives

Maintain support for 30 produce prescription/Farmacy programs and support establishment of 10 additional programs by September 30, 2025.

Project Outreach

Efforts will be made to coordinate with the Medicaid MCOs in order to target participation by individuals participating in that program as well as to maximize resources for supporting participation through transportation assistance, broadband support and covering the cost of produce to incentivize healthy behaviors.

Settings and Approaches

Direct Education	PSE Initiatives
Direct Ed Stages: Implementing, Evaluating Provided in English	PSE Stages: Planning and preparing for implementation (e.g., contacting sites, assessment, training), Implementing changes, Maintaining changes, Conducting follow-up assessments, evaluation, and/or monitoring
	 Settings Healthcare clinics and hospitals (0 tribal / 35 rural / 40 total)

Social Marketing Campaigns

Priority Populations

Priority Age Groups	Priority Racial Groups	Priority Ethnic Groups	Priority Gender Groups	
18-5960-7576 or older	No racial group priority	 No ethnic group priority 	No gender group priority	

Interventions

SNAP-Ed Interventions (Formerly Toolkit Interventions)

No data submitted

Previously Developed Interventions

Produce Prescriptions

Approved for use by FNS.

Adapted for this project:

Produce Prescriptions will be adapted to suit West Virginia audiences.

Research tested: SNAP-Ed Toolkit

Evidence Citation:

From the SNAP-Ed Toolkit:

https://snapedtoolkit.org/publications/a-pilot-fruit-and-vegetable-prescription-fvrx-program-improves-local-fruit-and-vegetable-consumption-nutrition-knowledge-and-food-purchasing-practices/

Produce Prescription Programs are recommended in the publication <u>Supporting Food and Nutrition Security Through Healthcare</u>, published through Nutrition and Obesity Policy Research and Evaluation Network (NOPREN). 2023.

The effect of food prescription programs on chronic disease management in primarily low-income populations: A systematic review and metaanalysis

Clinical outcomes of a large-scale, partnership-based regional food prescription program: results of a quasi-experimental study

New Interventions

No data submitted

Kids Markets

This project is entering year 11 of implementation

Project Description

The goal of the Kids Market program is to improve children's attitudes and behaviors related to fruits, vegetables and local foods. The program provides popup farmers markets at limited income schools, childcare centers and community events, increasing access to fresh produce for those who need it most. Children of all ages to receive tokens to purchase fresh, local fruits and vegetables from the market, participate in nutrition education and food sampling and receive recipes, shopping bags and small kitchen items as part of their participation.

Linked SMART Objectives

· Support kids markets in at least 10 counties by September 30th, 2025

Settings and Approaches

Direct Education	PSE Initiatives
Direct Ed Stages: Implementing, Evaluating Provided in English	PSE Stages: Implementing changes, Maintaining changes, Conducting follow-up assessments, evaluation, and/or monitoring Settings

		Annual Plan Final Review - National PEARS • Schools (K-12, elementary, middle, and high) (0 tribal / 25 rural / 30total)					
ocial Marketing Campaigns							
riority Populations							
Priority Age Groups	Priority Racial Groups	Priority Ethnic Groups	Priority Gender Groups				
 Younger than 5 5-7 (or grades K-2) 8-10 (or grades 3-5) 11-13 (or grades 6-8) 	No racial group priority	 No ethnic group priority 	 No gender group priority 				
terventions SNAP-Ed Interventions (Former)	y Toolkit Interventions)		AL				
Farm to School Adapted for this project: The Kids Market program is a	on adaptation of Farm to School. Kids Mar hildcare settings, and after school progra	ket adapts Farm to School to serve child ms.	ren in a variety of settings including				
Previously Developed Intervention	ons						

Food Policy Councils

No data submitted

This project is entering year 8 of implementation

Project Description

Based in Eberly College at WVU Morgantown, the Center for Resilient Communities (CRC) conducts longitudinal social science research and mapping of community food security and health equity in all 55 counties of WV. They maintain a resource portal on food and nutrition called WVFOODLINK, train community advocates in food policy council development and healthy food access strategies in WV. For the past seven years CRC has coordinated planning and policy workshops to train food, agriculture, nutrition and health professionals to develop strategic initiatives that address food insecurity in their region, county or town. It also runs the Appalachian Food Justice Institute, a training program for students and community food practitioners to build capacities to engage in regional food system and anti-hunger interventions. In FY 2025, the CRC will 1) Continue to provide support to the WV Food for All Coalition and Voices of Hunger WV, a initiative trains people with lived experience of food insecurity and hunger in policy advocacy work. 2) Publish policy briefs that serve policy, systems and environmental (PSE) efforts led by SNAP Ed (e.g. Office of Community Food Security; Farmacy, Grow This! etc.), 3) continue to map programming related to food, health and physical activity, 4) continue to facilitate food policy council trainings and engage low-income people experiencing food insecurity to advocate for programs and policies that improve food access. 5) support SNAP Ed with statewide N-PEARS reporting efforts and develop tools for staff and partners to understand their work within broader PSE goals across the state.

Linked SMART Objectives

- Train a minimum of 75 food policy advocates in the development of food security councils by September 30, 2025
- Generate, disseminate and maintain a web-based platform of food security data that can inform and ignite food security efforts at the state and local
 level

Project Outreach

Community Service Managers who oversee county assistance offices will be targeted for participation in Food Policy Councils so resources can better be established to meet the needs of the SNAP audience.

Settings and Approaches

Direct Education

Direct Ed Stages: This project does not include direct education

PSE Initiatives

PSE Stages: Implementing changes, Maintaining changes, Conducting follow-up assessments, evaluation, and/or monitoring

Settings

· Municipalities (0 tribal / 20 rural / 20 total)

Social Marketing Campaigns

Priority Populations

Priority Age Groups

No age group priority

Priority Racial Groups

No racial group priority

Priority Ethnic Groups

· No ethnic group priority

Priority Gender Groups

· No gender group priority

Interventions

SNAP-Ed Interventions (Formerly Toolkit Interventions)

No data submitted

Previously Developed Interventions

Food Policy Council

Approved for use by FNS.

Not adapted for this project

Research tested: U.S. Department of Health and Human Services: Rural Obesity Prevention Toolkit [Read more]

New Interventions

No data submitted

SNAP Stretch

This project is entering year 7 of implementation

Project Description

West Virginia has many challenges related to food access secondary to high rates of poverty and a rural landscape. West Virginia's farm economy is growing but still needs support. West Virginia exceeds the national average on number of farmers markets/population and is slightly under the national average for markets accepting SNAP. Farmers markets offer a solution to the limited access to fruits and vegetables around the state and using innovative methods such as increased marketing, mobile markets, voucher programs and school/childcare based markets, the local foods movement has grown in a way that is responsive to the needs of low-income families. A "SNAP Stretch" SNAP/EBT doubling/tripling program, conducted by the WV Food and Farm Coalition in partnership with SNAP Ed, has resulted in growth of EBT purchases at farmers markets from \$14,000 in 2018 to \$980,000 in 2021 and to due to less available funding, \$564,836 in 2023.

In FY25, the focus of the SNAP Stretch program will be expansion beyond farmers markets to include other local retailers. Using the Kids Market @ the Store program as a mechanism for identifying potential partners, the WV Food and Farm Coalition will provide additional outreach and technical assistance to support those same locations to accept EBT/SNAP, SNAP Stretch and other federally/locally funded food assistance programs. They will also provide resources for expanding infrastructure needed to facilitate stores in offering healthier and local food items.

Linked SMART Objectives

Provide support for and retain 35 existing SNAP Stretch location and add 8 additional locations by September 30, 2025

Project Outreach

A mailer about the program will be included in a mailing to individuals enrolled in SNAP/EBT in FY25.

Settings and Approaches

Direct Education		PSE Initiatives PSE Stages: Implementing changes, Maintaining changes Settings • Farmers' markets (0 tribal / 35 rural / 40 total)			
Direct Ed Stages: This project de	pes not include direct education				
ocial Marketing Campaigns					
riority Populations	TATAL SALASAN AND AND AND AND AND AND AND AND AND A	***************************************			
Priority Age Groups	Priority Racial Groups	Priority Ethnic Groups	Priority Gender Groups		
No age group priority	No racial group priority	No ethnic group priority	No gender group priority		
terventions			APPENDAGEN APPENDENCE OF THE STATE OF THE ST		
SNAP-Ed Interventions (Formerly	/ Toolkit Interventions)				
No data submitted					
Previously Developed Interventio	ns		-		
Double Up Food Bucks					
Approved for use by FNS.					

Adapted for this project:

Program has been adapted to West Virginia under the name SNAP Stretch

Practice tested:

Double Up Food Bucks is listed in the SNAP-Ed library, https://snaped.fns.usda.gov/library/materials/double-national-network

The 5 Year report of program impact can be found at this link:

https://fairfoodnetwork.org/wp-content/uploads/2016/09/FFN_DoubleUpFoodBucks_5YearReport.pdf

New Interventions

No data submitted

Rethink Your Drink

This project is entering year 9 of implementation

Project Description

Rethink your Drink is a social marketing and educational campaign targeting decreased consumption of sugar sweetened beverages. It was featured in the May, 2014 SNAP-Ed Toolkit for Obesity Prevention and is designated as evidence based. The Rethink Your Drink campaign has been incorporated into existing nutrition education classes for adults and youth over the past 8 years. In adult classes, fruit infused water tastings are made available during at least one class session in the series and participants receive fruit infused water recipes and an infuser water bottle. It is estimated 1000 adults will participate in Rethink Your Drink education in FY2024 as a part of SNAP Ed/EFNEP nutrition education classes.

In 2025, we plan to continue support of a 5-day "Rethink Your Drink Water Week" in select schools, childcare centers and summer camps including 4-H. The components of the water week include daily morning announcements, homeroom lessons, signing and displaying of a Rethink Your Drink pledge poster, display of "What Color is Your Wee" hydration charts in bathrooms, fruit infused water stations at lunch, "Sugar shocker posters" in cafeteria, Hydration tracker poster and a water fun day finale. The content of the "Water Week" will be modified for implementation in summer camps as well. The key messages are identifying sugar on food labels, health benefits of water and media influences on beverage behavior.

The Rethink Your Drink program mascot, Quench, will also visit school locations to serve as an ambassador for healthy beverage choices in students. In childcare and early elementary (K-2) classes, "Potter the Otter" books will be used as a supplemental educational activity and educational enhancement. Educational materials and activities are free and downloadable from the www.pottertheotter.com. Students will receive water bottles as an educational enhancement to support drinking water. It is estimated at least 10,000 students will participate in the "Water Week" in FY 2025.

Rethink Your Drink educational activities are also offered at community events, health fairs and festivals in qualifying schools and communities. Fruit infused water tastings and water recipes are offered. A matching game where participants match a generic beverage container with the number of sugar packets is used to educate participants on sugar content of beverages. It is estimated at least 20,000 individuals will participate in community-based Rethink Your Drink educational activities in 2025.

Policy, systems and environmental changes to support increased access to water are also a part of the Rethink Your Drink efforts. Policy changes will occur at the school level and include increased flexibility in water refill and restroom breaks and allowing water bottles filled with water into every classroom. Environmental changes at the school level include installation of filtered water bottle stations (funded with external grants) that children are more likely to use than traditional water fountains.

Linked SMART Objectives

 Support Rethink Your Drink, a social marketing and educational campaign encouraging consumption of water and reduction of sugar sweetened beverages statewide throughout fiscal year 2025.

Settings and Approaches

 Direct Education
 PSE Initiatives

 Direct Ed Stages: Implementing, Evaluating
 PSE Stages: Implementing changes, Maintaining changes

 Provided in English
 Settings

 Settings
 • Early care and education facilities (includes childcare centers, daycare homes, Head Start, preschool, and prekindergarten

9/30/24, 2:46 PM

Annual Plan Final Review - National PEARS

 Early care and education facilities (includes childcare centers, daycare homes, Head Start, preschool, and prekindergarten programs) (0 tribal / 20 rural / 20 total) programs) (0 tribal / 20 rural / 20 total)

Social Marketing Campaigns

Rethink Your Drink Campaign 1

Campaign Stages: Implementing, Evaluating

Provided in English

Entire State (all media markets) is the largest geographic unit.

Projected reach: 20,000

Priority Populations

Priority Age Groups	Priority Racial Groups	Priority Ethnic Groups	Priority Gender Groups		
No age group priority	No racial group priority	No ethnic group priority	No gender group priority		

Interventions

SNAP-Ed Interventions (Formerly Toolkit Interventions)

Rethink Your Drink

Not adapted for this project

Previously Developed Interventions

No data submitted

New Interventions

No data submitted

Edible Gardens

This project is entering year 11 of implementation

Project Description

Edible gardens serve as an environmental change in childcare, school or community settings that can support greater consumption of fruits and vegetables by increasing individual's knowledge and attitudes about fruits and vegetables. In addition, the garden serves as an opportunity for increased access as produce grown in the gardens can be used for taste tests, be integrated into food service offerings, be sent home with students or be donated to local food assistance organizations. Gardens also serve as a learning tool that can ensure fruit and vegetable accessibility by providing the environment for teaching skills around growing, preparing and preserving one's own foods.

Texas Learn, Grow, Eat, Go! curriculum will be used as the primary nutrition education curriculum in elementary/middle school classrooms in schools or community programs with an existing edible garden so nutrition education can be better integrated with garden activities. For younger audiences, the Grow It, Try It, Like It curriculum will be used instead. SNAP educators will work with WVU Extension agriculture faculty to provide support to growing activities.

In adult audiences, educators will integrate gardening activities into classes and will help to establish gardens at sites such as drug recovery centers and other community locations that serve low income families. Adult educators collaborate with WVU Families and Health Extension faculty to offer food preservation and canning education in coordination with nutrition education.

Linked SMART Objectives

- Support Grow This!, a home gardening social marketing and community outreach program to all 55 counties throughout FY25.
- Establish and/or maintain at least 30 edible gardens in schools, communities and child-care centers across the state throughout FY25.

Settings and Approaches

Direct Education Direct Ed Stages: Implementing, Evaluating Provided in English Settings • Schools (K-12, elementary, middle, and high) (0 tribal / 20 rural / 25

PSE Initiatives

PSE Stages: Implementing changes, Maintaining changes, Conducting follow-up assessments, evaluation, and/or monitoring

Settings

Schools (K-12, elementary, middle, and high) (0 tribal / 20 rural / 25 total)

Social Marketing Campaigns

Priority Populations

Priority Age Groups	Priority Racial Groups	Priority Ethnic Groups	Priority Gender Groups
No age group priority	No racial group priority	No ethnic group priority	No gender group priority

Interventions

SNAP-Ed Interventions (Formerly Toolkit Interventions)

No data submitted

Previously Developed Interventions

Learn Grow Eat Go

Approved for use by FNS.

Not adapted for this project

Research tested: USDA NIFA funded research

Evidence Citation:

Learn Grow Eat Go is the Junior Master Gardeners curriculum developed by Texas.

Published research:

Impact of school-based vegetable garden and physical activity coordinated health interventions on weight status and weight-related behaviors of ethnically diverse, low-income students: Study design and baseline data of the Texas, Grow! Eat! Go! (TGEG) cluster-randomized controlled trial

Using Family-Focused Garden, Nutrition, and Physical Activity Programs To Reduce Childhood Obesity: The Texas! Go! Eat! Grow! Pilot Study

Texas Grow! Eat! GO! Using Family Focused Garden, Nutrition and Physical Activity Programs to Reduce Childhood Obesity

Grow It, Try It, Like It!

Approved for use by FNS.

Not adapted for this project

Research tested: Food and Nutrition Service: Nutrition Evidence Library [Read more]

New Interventions

No data submitted

Grow This!

This project is entering year 9 of implementation

Project Description

Grow This! is a social media campaign that aims to promote gardening to low income adults and youth across WV. The campaign was started in 2018 as the result of a brainstorming session among local community leaders and health advocates who felt promoting and celebrating gardening as part of West Virginia's Appalachian heritage could address multiple health disparities including those related to nutrition and mental health. The campaign has steadily grown from an audience of around 4,000 annually to over 27,000 in FY2020. The COVID-19 pandemic necessitated reaching people virtually and the established Grow This! Facebook resulted in a quick and easy transition from face to face gardening support to a virtual platform. Due to its overwhelming success and the number of participants who continue to choose the virtual option, this approach, in addition to an in-person option, will continue to be available post-pandemic.

The campaign offers two ways for individuals to participate. In person gardening education and promotion events where individuals can plant seeds and learn about crops and virtual participation through the Facebook platform. Individuals signing up via Facebook complete a short survey including demographic information, reason for joining the challenge, intended use of produce, gardening expertise level and method of gardening. Participants receive a small amount of sample seeds (funded by external grants for those not meeting SNAP eligibility), and educational support for nutrition and gardening activities. Individuals or teams that document their challenge by posting updates when they plant, cultivate and harvest their crop will be eligible to receive prizes.

The campaign focuses on 3-4 targeted crops each year so education and marketing can be consistent statewide and often crops for Grow This! coincide with foods promoted through the Harvest of the Month campaign. Promoting gardening as a simple, low cost and fun activity is important. For the novice gardener or those who have never had an interest in gardening, a quick demonstration using a novel approach may be the push they need to give it a shot.

Linked SMART Objectives

Support Grow This!, a home gardening social marketing and community outreach program to all 55 counties throughout FY25.

Project Outreach

The Grow This! campaign is advertised via social media platforms including Facebook, Instagram and Tik Tok. School and community-based Grow This! outreach also occurs in low-income schools and communities.

Settings and Approaches

Direct Education

Direct Ed Stages: Implementing, Evaluating

Provided in English

Settings

PSE Initiatives

PSE Stages: Planning and preparing for implementation (e.g., contacting sites, assessment, training), Implementing changes, Maintaining changes, Conducting follow-up assessments, evaluation, and/or monitoring

Schools (K-12, elementary, middle, and high) (0 tribal / 45 rural / 50 total)

Social Marketing Campaigns

Grow This! Campaign 1

Campaign Stages: Implementing, Evaluating

Provided in English

Entire State (all media markets) is the largest geographic unit.

Projected reach: 70,000

Priority Populations

Priority Age Groups

· No age group priority

Priority Racial Groups

· No racial group priority

Priority Ethnic Groups

· No ethnic group priority

Priority Gender Groups

· No gender group priority

Interventions

SNAP-Ed Interventions (Formerly Toolkit Interventions)

No data submitted

Previously Developed Interventions

Gardening

Approved for use by FNS.

Adapted for this project:

The intervention will be tailored to the needs and abilities of West Virginia household gardeners.

Geographic adaptations - seed selection

Intervention materials will be created to market and promote the gardening program, specific to the needs and preferences of West Virginia growers. Educational materials will be developed to support the specific crops chosen each year.

Research tested: U.S. Department of Health and Human Services: Rural Obesity Prevention Toolkit [Read more]

New Interventions

No data submitted

Harvest of the Month

This project is entering year 9 of implementation

https://national.pears.io/plans/645/pdf/

Project Description

WV Harvest of the Month is a campaign to increase consumption of locally grown fruits and vegetables by WV adults and youth by integrating targeted educational, promotional and taste testing opportunities into existing nutrition education and outreach activities. Harvest of the Month programs in several states have been included in the SNAP-Ed Obesity Prevention Toolkit as strategies that integrate social marketing, nutrition education and PSE change with the goal of influencing healthy eating behaviors.

In response to data from a statewide Smarter Lunchroom assessment in 2017 which indicated many schools were not offering taste testing opportunities for targeted food items, a WV "Harvest of the Month" campaign was developed. The Harvest of the Month calendar is developed in collaboration with local farmers to highlight foods that are in season and produced in large quantities in the state. The Harvest of the Month campaign has been consistently integrated into all SNAP-Ed direct nutrition education programming and educators include demonstrations, taste testing and education about the targeted food items during regular nutrition education outreach.

A "Harvest of the Month" agreement has been created to share with Child Nutrition Directors or food service directors at targeted youth sites. The agreement includes support for a school wide taste testing, promotional materials, nutrition education and connections to local suppliers from SNAP-Ed in exchange for agreement from the food service director to put the targeted food item on the menu, preferably procured from a local producer. In addition to nutrition education, education and activities on growing targeted items has been integrated where applicable.

Social media components for the campaign are being developed and include educational videos featuring local farmers and recipe demonstration videos.

Linked SMART Objectives

Support Food of the Month promotions in at least 30 counties by September 30th, 2025.

Project Outreach

The Harvest of the Month campaign is implemented primarily within low-income schools where SNAP Educators are providing direct education. The messaging is also incorporated at community outreach events targeted at low income audiences or through adult nutrition education programs.

Settings and Approaches

Direct Education

Direct Ed Stages: Implementing

Provided in English

Settings

Schools (K-12, elementary, middle, and high) (0 tribal / 45 rural / 50 total)

PSE Initiatives

PSE Stages: Planning and preparing for implementation (e.g., contacting sites, assessment, training), Implementing changes

Settings

Schools (K-12, elementary, middle, and high) (0 tribal / 45 rural / 50 total)

Social Marketing Campaigns

Food of the Month Campaign 1

Campaign Stages: Implementing

Provided in English

School(s) is the largest geographic unit.

Description of areas covered:

Low-income schools will be targeted for the campaign, with primarily those already receiving nutrition education.

Projected reach: 10,000

Priority Populations

Priority Age Groups

Priority Racial Groups

Priority Ethnic Groups

Priority Gender Groups

- Younger than 5
- 5-7 (or grades K-2)
- 8-10 (or grades 3-5)
- 11-13 (or grades 6-8)
- 14-17 (or grades 9-12)
- · No racial group priority
- No ethnic group priority
- No gender group priority

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SNAP-Ed Interventions (Formerly Toolkit Interventions)

Michigan Harvest to Table

Adapted for this project:

The Harvest of the Month program has been adapted to incorporate fruits and vegetables that are available in West Virginia.

Previously Developed Interventions

No data submitted

New Interventions

No data submitted

Direct Nutrition Education

This project is entering year 15 of implementation

Project Description

Adults:

In the adult FNP direct education program, instructors will use many techniques to teach the SNAP-eligible target population. Adults enroll in direct education classes in person and online. Classes are completed in partnership with existing community-based programs and services who enroll their clients. The adult program of FNP places an emphasis on experiential learning so that participants can understand and apply the concepts they have learned. Classes consist of nutrition education and food demonstrations which include limited cooking and food preparation by the participants. The food demonstrations that are conducted with each lesson are the center of the learner model utilized. FNP participants learn the basics of healthy food preparation. Key educational messages taught are consistent with the most current Dietary Guidelines. As part of nutrition education classes, FNP provides direct education related to physical activity, including an experiential learning component.

Our series approach to teaching food preparation and basic nutrition education will be conducted weekly over a period of 6-9 weeks to provide our participants with consistent reinforcement of key messages. This strategy provides participants with a solid foundation of food preparation and cooking skills that can be replicated in the home. In certain instances, the instructor may extend the class series to include topics relevant to a group of participants such as a parent group who needs additional guidance on feeding their children.

Additionally, FNP conducts numerous one-time only lessons in farmers markets, food pantries, community centers, churches, public health offices, and other appropriate venues where most participants qualify as the SNAP-Ed target audience.

Youth:

During the school year, instructors partner with local school boards, school administrators and teachers to provide in-class nutrition education at to students from Pre-K-12. Schools are eligible for SNAP-Ed programming if the school participates in CEP or is qualified by free/reduced lunch participation. A majority of education is focused at early elementary aged students. After-school programs, while less frequent, are also outlets for education services. Youth

programming also includes summer camping activities. We provide nutrition education in from independent day camps, conducted solely by the instructor, to partnership programs where the instructor teaches at a previously established summer activity.

Curricula topics meet many of the WV Department of Education's Content Standards and Objectives in the areas of health, wellness, math, reading, science, language arts and 21st Century Learning skills. School-based programs are conducted with a series approach, allowing for repetition and reinforcement of key concepts. Lessons are delivered once per week for 6-8 weeks. Instructors also often work with participating teachers to assign mid-week activities, which reinforce concepts between presentations. We revisit targeted schools to deliver the course to subsequent grade levels, allowing for corroboration of key concepts from year to year. We strongly believe this approach of continual reinforcement provides youth participants the opportunity to develop a solid knowledge base of proper nutrition and physical activity.

Linked SMART Objectives

• Provide at least 50 students with service/experiential learning experiences as a way of meeting educational requirements of their degree.

Settings and Approaches

Direct Education

Direct Ed Stages: Implementing, Evaluating

Provided in English

Settings

- Schools (K-12, elementary, middle, and high) (0 tribal / 55 rural / 60 total)
- Group living arrangements/homes (0 tribal / 25 rural / 30 total)

PSE Initiatives

PSE Stages: Implementing changes, Maintaining changes, Conducting follow-up assessments, evaluation, and/or monitoring

Social Marketing Campaigns

Priority Populations

Priority Age Groups

· No age group priority

Priority Racial Groups

· No racial group priority

Priority Ethnic Groups

No ethnic group priority

Priority Gender Groups

· No gender group priority

Interventions

SNAP-Ed Interventions (Formerly Toolkit Interventions)

Eating Smart • Being Active

Not adapted for this project

Rethink Your Drink

Not adapted for this project

Previously Developed Interventions

Show Me Nutrition

Approved for use by FNS.

Not adapted for this project

Research tested: SNAP-Ed Connection

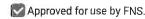
Evidence Citation:

Show Me Nutrition link in SNAP-Ed Connection

A Community Based Approach to Deter Childhood Obesity in Title 1 Schools

A Content Analysis of Nutrition Education Curricula Used With Low-Income Audiences: Implications for Questionnaire Development

Learn Grow Eat Go!



Not adapted for this project

Research tested: USDA NIFA funded research

Evidence Citation:

USDA-NIFA funded through capacity funding: https://www.nifa.usda.gov/about-nifa/blogs/planting-future

Learn Grow Eat Go is the Junior Master Gardeners curriculum developed by Texas.

Impact of school-based vegetable garden and physical activity coordinated health interventions on weight status and weight-related behaviors of ethnically diverse, low-income students: Study design and baseline data of the Texas, Grow! Eat! Go! (TGEG) cluster-randomized controlled trial

Using Family-Focused Garden, Nutrition, and Physical Activity Programs To Reduce Childhood Obesity: The Texas! Go! Eat! Grow! Pilot Study

Texas Grow! Eat! GO! Using Family Focused Garden, Nutrition and Physical Activity Programs to Reduce Childhood Obesity

New Interventions

No data submitted

Adult and Youth Physical Activity

This project is entering year 1 of implementation

Project Description

In West Virginia, BRFSS data shows only 17% of adults met physical activity guidelines in 2019. In 2022, almost a third of West Virginia adults (30.2%) did not participate in any leisure time physical activity in the previous month. Youth data reflects similar lack of physical activity. 2021 YRBS data indicates more than 3/4 of West Virginia youth did not meet youth PA guidelines (76.1%); 15.8% reported they did not have 60 minutes of PA on any day in the preceding week.

Walking is an activity that is suitable for all ages and ability levels and could improve leisure time activity of WV residents if adopted. The FY2025 plan continues targeted physical activity programming around walking through walking challenges, walking groups and marketing of community locations for walking. This work has been enhanced through a partnership with Active Southern West Virginia and their *Community Captain* and *Walk with Ease* programs. Faculty with the West Virginia University College of Physical Activity and Sport Science (CPASS) will provide education and support for classroom physical activity interventions such as *Active Academics* and health educators and partners will continue to implement PSE changes such as *Active Pathways*.

The recent hiring of a SNAP-Ed Physical Activity Specialist will allow for expanded training and assessment opportunities and engagement in activities such as walkability assessments within communities to identify barriers to walking. Additionally, youth participants will be trained to conduct PhotoVoice assessments to identify barriers and facilitators to walking in local communities. Adults will participate in walking challenges and community captains will be identified to provide ongoing walking leadership and support within communities.

In addition to walking programs, youth physical activity will be addressed through classroom PA efforts. Experts recommend that classroom physical activity be provided multiple times during the day, in brief periods of five minutes or more, to K-12 students; activities should not replace recess or physical education (CDC-Classroom strategies 2018). Active classrooms are generally considered to be a low or no-cost approach to increasing students' physical activity (CDC-Youth PA 2009, AHA-Physically active schools). Youth will participate in school-based walking challenges, using pedometers as a means to collect objective data. In addition, educators will support use of, Active Academics®, a resource for classroom teachers to provide practical physical activity ideas that can be integrated into regular classroom content and get students "up and moving" while still engaged in the learning process. Standards-based activity ideas utilize the Common Core and national Standards and offer a variety of activities for PreK - 5th grade classrooms.

In addition to efforts in schools and with adult participants, Health educators will support the creation of "Active Pathways" to prompt physical activity in school and community environments either through the use of painted stencils or use of trail signs.

Linked SMART Objectives

- Support school-based walking programs in at least 5 schools by September 30, 2025.
- Support installation of at least 10 Active Pathways to prompt physical activity in school and community environments.
- Promote increased classroom activity time through the integration of Active Academics in at least 100 classrooms by September 30, 2025.
- Support walking and physical activity programs for adults in at least 5 counties by September 30, 2025.

Project Outreach

Prospective youth participants will be recruited from sites implementing direct education or public health initiatives, primarily schools. Adults will be recruited from adult direct education classes. Additional recruitment of adults will take place via social media and word of mouth in counties offering walking programs.

Direct Education PSE Initiatives Direct Ed Stages: This project does not include direct education PSE Stages: Planning and preparing for implementation (e.g., contacting sites, assessment, training), Implementing changes, Maintaining changes, Conducting follow-up assessments, evaluation,

Settings

and/or monitoring

- Schools (K-12, elementary, middle, and high) (0 tribal / 15 rural / 20 total)
- Parks and open spaces (0 tribal / 10 rural / 10 total)
- Bicycle and walking paths (0 tribal / 5 rural / 5 total)

Social Marketing Campaigns

Priority Populations

Priority Age Groups	Priority Racial Groups	Priority Ethnic Groups	Priority Gender Groups		
No age group priority	No racial group priority	No ethnic group priority	No gender group priority		

Interventions

SNAP-Ed Interventions (Formerly Toolkit Interventions)	

Walk With Ease

Not adapted for this project

Classroom Energizer Teacher Training Workshop

Not adapted for this project

Previously Developed Interventions

Active Academics

Approved for use by FNS.

Not adapted for this project

Practice tested:

Physically Active Academic Lessons in Elementary Children- Bartholomew and Jowers, Preventative Medicine, 2011. Discusses impact of the Texas I-CAN program.

https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3116963/pdf/nihms269569.pdf

PhotoVoice

Approved for use by FNS.

Not adapted for this project

Practice tested:

Fountain, S., Hale, R., Spencer, N., Morgan, J., James, L., & Stewart, M. K. (2021). A 10-Year Systematic Review of Photovoice Projects With Youth in the United States. *Health promotion practice*, *22*(6), 767–777. https://doi.org/10.1177/15248399211019978

Madrigal, D. S., Salvatore, A., Casillas, G., Casillas, C., Vera, I., Eskenazi, B., & Minkler, M. (2014). Health in my community: conducting and evaluating PhotoVoice as a tool to promote environmental health and leadership among Latino/a youth. *Progress in community health partnerships: research, education, and action, 8*(3), 317–329. https://doi.org/10.1353/cpr.2014.0034

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No data submitted

West Virginia Department of Human Services (State Agency) Projects and Activities

No data submitted

Planned Evaluations

WV Family Nutrition Program - WVU (Implementing Agency) Evaluations

Produce Prescription

Projects Evaluated

· Produce Prescriptions

Process 10/01/2024 - 09/30/2026

Project Components Evaluated:

- Direct Education
- PSE

Data Collection Methods:

- · Self-administered paper survey
- · Self-administered online survey
- · Qualitative interview
- · Direct observation (e.g., monitoring tool)

Planned Use of Results:

- · Peer-reviewed paper: None
- · Conference presentations: None
- · Intervention adaptation or improvement
- · Dissemination to policy makers

Outcome 10/01/2024 - 09/30/2026

Project Components Evaluated:

PSE

Objectives:

• Maintain support for 30 produce prescription/Farmacy programs and support establishment of 10 additional programs by September 30, 2025.

Data Collection Methods:

- · Self-administered paper survey
- · Self-administered online survey
- · Qualitative interview
- · Direct observation (e.g., monitoring tool)

Planned Use of Results:

- · Conference presentations: None
- Peer-reviewed paper: None
- Intervention adaptation or improvement
- · Community-wide dissemination
- · Partner dissemination
- Dissemination to policy makers

Measurements:

- Pretest
- Posttest

Kids Market @ the Store

Projects Evaluated

Kids Market @ The Store

Process 10/01/2024 - 09/30/2026

Project Components Evaluated:

PSE

Data Collection Methods:

- · Self-administered paper survey
- · Self-administered online survey
- · Direct observation (e.g., monitoring tool)
- · Other: Social Media

Planned Use of Results:

- · Partner dissemination
- · Dissemination to policy makers
- Conference presentations: None

- · Peer-reviewed paper: None
- · Intervention adaptation or improvement
- · Community-wide dissemination

Outcome 10/01/2024 - 09/30/2026

Project Components Evaluated:

• PSE

Objectives:

• Enroll at least 3000 families in the Kids Market @theStore program by September 30, 2025.

Data Collection Methods:

- · Self-administered paper survey
- · Self-administered online survey
- · Other: social media

Planned Use of Results:

- · Intervention adaptation or improvement
- · Community-wide dissemination
- · Partner dissemination
- · Dissemination to policy makers
- · Conference presentations: None
- · Peer-reviewed paper: None

Measurements:

- Pretest
- Posttest
- Other: Veggie meter (skin carotenoid assessment)

Grow This!

Projects Evaluated

· Grow This!

Process 10/01/2024 - 09/30/2026

Project Components Evaluated:

- PSE
- · Social Marketing Campaign

Data Collection Methods:

- · Self-administered online survey
- · Direct observation (e.g., monitoring tool)
- · Other: social media

Planned Use of Results:

- · Conference presentations: None
- · Intervention adaptation or improvement
- · Community-wide dissemination
- · Partner dissemination
- · Dissemination to policy makers
- · Peer-reviewed paper: None

Outcome 10/01/2024 - 09/30/2026

Project Components Evaluated:

PSE

Objectives:

• Support Grow This!, a home gardening social marketing and community outreach program to all 55 counties throughout FY25.

Data Collection Methods:

- · Self-administered online survey
- · Direct observation (e.g., monitoring tool)
- · Other: social media

Planned Use of Results:

- · Conference presentations: None
- · Intervention adaptation or improvement
- · Community-wide dissemination
- · Partner dissemination
- · Dissemination to policy makers
- · Peer-reviewed paper: None

Measurements:

- Pretest
- Posttest

Prior Evaluations:

McCartney K, Wood G, Gabbert K, Warner M, Tompkins NO. Home Gardening Resurgence During COVID: Motivations and Perceived Benefits of Participating in Grow This! Health Promot Pract. 2023 Nov;24(6):1230-1236. doi: 10.1177/15248399221102919. Epub 2022 Jul 1. PMID: 35778887.

West Virginia Department of Human Services (State Agency) Evaluations

No data submitted

Coordination and Collaboration

WV Family Nutrition Program - WVU (Implementing Agency)

Coordination and Collaborations With Other Federal Nutrition, Obesity Prevention, and Health Programs

Program/Organization Type	Needs Assessment / Plan Development	Coordination of Messaging/Materials/Approaches	PSE Change Efforts	Social Marketing Campaign(s)	Improvement of SNAP-Ed Access for Target Audiences	Other
National Institute of Food and A	griculture, USDA					
Expanded Food and Nutrition Education Program (EFNEP)			0		0	
Other: Summer EBT			0	0		
Food and Nutrition Service, USD	A					
National School Lunch Program (NSLP)	0		0		0	

Program/Organization Type	Needs Assessment / Plan Development	Coordination of Messaging/Materials/Approaches	PSE Change Efforts	Social Marketing Campaign(s)	Improvement of SNAP-Ed Access for Target Audiences	Other
Summer Food Service Program (SFSP)	0	$ \mathbf{v}$	0	0		
Supplemental Nutrition Assistance Program (SNAP)	0		0	0	ightharpoons	
Centers for Disease Control and P	revention, HHS					
Other: High Obesity Program Grant						
Food and Nutrition Service, USDA						
Commodity Supplemental Food Program (CSFP)				0		
Community Food Systems Programs (e.g., Farm to School and Community Food Projects)	\square		0		0	Evaluation
The Emergency Food Assistance Program (TEFAP)		\checkmark	0	0		
National Institute of Food and Agri	culture, USDA					
Gus Schumacher Nutrition Incentive Program (GusNIP)		ightharpoons			\triangleright	Evaluation
Other Federal Nutrition, Obesity Pro	evention, and Hea	lth Programs				
Other: Healthy Food Financing nitiative			0	0	0	Evaluation
National Institute of Food and Agric	culture, USDA					
Other: Community Food Project Grant			0	0	0	Evaluation

Engagement With Multisector Partnerships/Coalitions

WV State Nutrition Action Council State/Territory

Sectors Represented

- Agriculture: 1
- · Community design: 1
- Education: 1
- Food industry: 1
- Food retailers: 1

Key Activities

Members of the WV State Nutrition Action Council meet quarterly to provide updates on outreach related to nutrition, physical activity and obesity prevention. The meeting allows opportunities for identifying synergies between projects.

Consultation, Coordination, and Collaboration With Tribes and Tribal Organizations

Coordination and Collaboration With Minority-Serving Institutions

West Virginia Department of Human Services (State Agency)

Coordination and Collaborations With Other Federal Nutrition, Obesity Prevention, and Health Programs
No data has been provided for this section.

Engagement With Multisector Partnerships/Coalitions

Consultation, Coordination, and Collaboration With Tribes and Tribal Organizations

Coordination and Collaboration With Minority-Serving Institutions

State Budget Summary

State Budget Summary	SNAP-Ed Planned Cost (\$)
1. State Agency Budget	\$0.00
2. Implementing Agency Budget(s)	\$4,120,759.00
3. Total Federal Funds	\$4,120,759.00

Funding Source Summary	Total Funds (\$)
Estimated unobligated balance/carry-over from previous FY	\$0.00
2. Funds requested from current FY allocation	\$4,120,759.00
3. Total Federal Funds	\$4,120,759.00

WV Family Nutrition Program - WVU (Implementing Agency) Budget

Total Agency Budget

Agency Budget Summary	SNAP-Ed Planned Cost @	Other Planned Funding @
1. Direct Cost	\$3,451,195.00	\$0.00
a. Salary/Benefits 😯	\$2,329,532.00	\$0.00
b. Contracts/Sub-Grants/Agreements	\$975,948.00	\$0.00
c. Non-Capital Equipment/Office Supplies 🚱	\$0.00	\$0.00

Agency Budget Summary	SNAP-Ed Planned Cost @	Other Planned Funding @
d. Nutrition Education Materials 🕝	\$72,589.00	\$0.00
e. Travel 😯	\$72,626.00	\$0.00
f. Building/Space Lease or Rental	\$0.00	\$0.00
g. Cost of Publicly-Owned Building Space 😯	\$0.00	\$0.00
h. Maintenance and Repair	\$0.00	\$0.00
i. Institutional Memberships and Subscriptions 🔞	\$500.00	\$0.00
j. Equipment and Other Capital Expenditures 🔞	\$0.00	\$0.00
 Indirect Costs, not including building space/ contracts/subgrants/agreements 	\$669,564.00	\$0.00
▼ SNAP-Ed Indirect Cost Explanation Indirect cost rate: 26.00% F&A		
▼ Other Indirect Cost Explanation Indirect cost rate: 0.00% not applicable		
. Total Federal Funds for Agency	\$4,120,759.00	\$0.00
Direct Cost + Indirect Costs		

Funding Source	Total Funds (\$)
Estimated unobligated balance/carry-over from previous FY for Agency	
2. Funds requested from current FY allocation for Agency Total Federal Funds - Estimated unobligated balance/carry-over from previous FY	\$4,120,759.00
3. Total Federal Funds for Agency	\$4,120,759.00

Direct Cost Breakdown

Project Budgets

Adult and Youth Physical Activity		CARDIAC	
\$259,699.00	Salary/Benefits	\$361,011.00	Salary/Benefits
\$0.00	Contracts/Sub-Grants/Agreements	\$0.00	Contracts/Sub-Grants/Agreements
\$0.00	Non-Capital Equipment/Office Supplies	\$0.00	Non-Capital Equipment/Office Supplies
\$1,000.00	Nutrition Education Materials	\$6,000.00	Nutrition Education Materials
\$5,468.00	Travel	\$5,958.00	Travel
\$0.00	Building/Space Lease or Rental	\$0.00	Building/Space Lease or Rental
\$0.00	Cost of Publicly-Owned Building Space	\$0.00	Cost of Publicly-Owned Building Space
\$0.00	Maintenance and Repair	\$0.00	Maintenance and Repair
\$0.00	Institutional Memberships and Subscriptions	\$0.00	Institutional Memberships and Subscriptions
\$0.00	Equipment and Other Capital Expenditures	\$0.00	Equipment and Other Capital Expenditures
\$266,167.00	Total Direct Cost	\$372,969.00	Total Direct Cost

Food Policy Councils

Grow This!

Kids Markets

	Direct Nutritio	Edible Gardens		
	\$191,429.00	Salary/Benefits	\$201,540.00	
	\$558,817.00	Contracts/Sub-Grants/Agreements	\$0.00	(
	\$0.00	Non-Capital Equipment/Office Supplies	\$0.00	1
,	\$990.00	Nutrition Education Materials	\$850.00	1
	\$4,008.00	Travel	\$6,658.00	7
	\$0.00	Building/Space Lease or Rental	\$0.00	Е
	\$0.00	Cost of Publicly-Owned Building Space	\$0.00	C
	\$0.00	Maintenance and Repair	\$0.00	N
	\$500.00	Institutional Memberships and Subscriptions	\$0.00	li
	\$0.00	Equipment and Other Capital Expenditures	\$0.00	Е
	\$755,744.00	Total Direct Cost	\$209,048.00	T

\$201,540.00	Salary/Benefits
\$0.00	Contracts/Sub-Grants/Agreements
\$0.00	Non-Capital Equipment/Office Supplies
\$850.00	Nutrition Education Materials
\$6,658.00	Travel
\$0.00	Building/Space Lease or Rental
\$0.00	Cost of Publicly-Owned Building Space
\$0.00	Maintenance and Repair
\$0.00	Institutional Memberships and Subscriptions
\$0.00	Equipment and Other Capital Expenditures
\$209,048.00	Total Direct Cost

Salary/Benefits
Contracts/Sub-Grants/Agreements
Non-Capital Equipment/Office Supplies
Nutrition Education Materials
Travel
Building/Space Lease or Rental
Cost of Publicly-Owned Building Space
Maintenance and Repair
Institutional Memberships and Subscriptions
Equipment and Other Capital Expenditures
Total Direct Cost

\$204,291.00	Salary/Benefits
\$0.00	Contracts/Sub-Grants/Agreements
\$0.00	Non-Capital Equipment/Office Supplies
\$12,000.00	Nutrition Education Materials
\$6,258.00	Travel
\$0.00	Building/Space Lease or Rental
\$0.00	Cost of Publicly-Owned Building Space
\$0.00	Maintenance and Repair
\$0.00	Institutional Memberships and Subscriptions
\$0.00	Equipment and Other Capital Expenditures
\$222,549.00	Total Direct Cost

Harvest of the Month			
\$200,434.00	Salary/Benefits		
\$0.00	Contracts/Sub-Grants/Agreements		
\$0.00	Non-Capital Equipment/Office Supplies		
\$2,000.00	Nutrition Education Materials		
\$6,458.00	Travel		
\$0.00	Building/Space Lease or Rental		
\$0.00	Cost of Publicly-Owned Building Space		
\$0.00	Maintenance and Repair		
\$0.00	Institutional Memberships and Subscriptions		
\$0.00	Equipment and Other Capital Expenditures		

\$201,339.00	Salary/Benefits
\$138,641.00	Contracts/Sub-Grants/Agreements
\$0.00	Non-Capital Equipment/Office Supplies
\$10,000.00	Nutrition Education.Materials
\$6,478.00	Travel
\$0.00	Building/Space Lease or Rental
\$0.00	Cost of Publicly-Owned Building Space
\$0.00	Maintenance and Repair
\$0.00	Institutional Memberships and Subscriptions
\$0.00	Equipment and Other Capital Expenditures

Produce Prescriptions

SNAP Stretch

\$208,892.00 Total Direct Cost

\$356,458.00 Total Direct Cost

Kids Market @ The Store			
\$202,130.00	Salary/Benefits		
\$0.00	Contracts/Sub-Grants/Agreements		
\$0.00	Non-Capital Equipment/Office Supplies		
\$15,500.00	Nutrition Education Materials		
\$7,058.00	Travel		
\$0.00	Building/Space Lease or Rental		
\$0.00	Cost of Publicly-Owned Building Space		
\$0.00	Maintenance and Repair		
\$0.00	Institutional Memberships and Subscriptions		
\$0.00	Equipment and Other Capital Expenditures		
\$224,688.00	Total Direct Cost		

\$190,381.00	Salary/Benefits
\$108,379.00	Contracts/Sub-Grants/Agreements
\$0.00	Non-Capital Equipment/Office Supplies
\$9,299.00	Nutrition Education Materials
\$5,458.00	Travel
\$0.00	Building/Space Lease or Rental
\$0.00	Cost of Publicly-Owned Building Space
\$0.00	Maintenance and Repair
\$0.00	Institutional Memberships and Subscriptions
\$0.00	Equipment and Other Capital Expenditures
\$313,517.00	Total Direct Cost

Rethink Your Drink			
\$195,074.00	Salary/Benefits		
\$0.00	Contracts/Sub-Grants/Agreements		
\$0.00	Non-Capital Equipment/Office Supplies		
\$14,000.00	Nutrition Education Materials		
\$6,458.00	Travel		
\$0.00	Building/Space Lease or Rental		
\$0.00	Cost of Publicly-Owned Building Space		
\$0.00	Maintenance and Repair		
\$0.00	Institutional Memberships and Subscriptions		
\$0.00	Equipment and Other Capital Expenditures		
\$215,532.00	Total Direct Cost		

\$12,845.00	Salary/Benefits
\$170,111.00	Contracts/Sub-Grants/Agreements
\$0.00	Non-Capital Equipment/Office Supplies
\$950.00	Nutrition Education Materials
\$5,958.00	Travel
\$0.00	Building/Space Lease or Rental
\$0.00	Cost of Publicly-Owned Building Space
\$0.00	Maintenance and Repair
\$0.00	Institutional Memberships and Subscriptions
\$0.00	Equipment and Other Capital Expenditures
\$189,864.00	Total Direct Cost

Other SNAP-Ed Planned Expenditures

\$0.00	Salary/Benefits
\$0.00	Contracts/Sub-Grants/Agreements
\$0.00	Non-Capital Equipment/Office Supplies
\$0.00	Nutrition Education Materials
\$0.00	Travel
\$0.00	Building/Space Lease or Rental
\$0.00	Cost of Publicly-Owned Building Space
\$0.00	Maintenance and Repair

\$0.00 Institutional Memberships and Subscriptions

\$0.00 Equipment and Other Capital Expenditures

\$0.00 Total Direct Cost

Planned Staffing

Staff Positions

Position Title	FTE's charged to SNAP-Ed	% of SNAP-Ed Time Spent on Management and Administration	% of SNAP-Ed Time Spent on SNAP-Ed Delivery	Average Full Salary, Benefits, and Wages for Position	Subtotals (FTE × Average Full Salary,
Biostatistician	0.05	90.00%	10.00%		Benefits, and Wages)
		90.00%	10.00%	\$179,796.00	\$8,989.80
Cardiac Graduate Assistant	1.00	50.00%	50.00%	\$27,032.00	\$27,032.00
Cardiac Project Co PI	0.15	100.00%	0.00%	\$145,362.00	\$21,804.30
Cardiac Project Intervention Specialist	0.10	80.00%	20.00%	\$89,852.00	\$8,985.20
Cardiac Project Manager	1.00	90.00%	10.00%	\$75,030.00	\$75,030.00
Cardiac Project PI	0.15	100.00%	0.00%	\$180,599.00	\$27,089.85
Cardiac Project Tech Specialist and Evaluator	0.10	90.00%	10.00%	\$92,079.00	\$9,207.90
Co-Director	0.25	90.00%	10.00%	\$101,294.00	\$25,323.50
CRC Community Food Security Coordinator	0.40	50.00%	50.00%	\$61,500.00	\$24,600.00
CRC GIS Director	0.20	100.00%	0.00%	\$88,615.00	\$17,723.00
CRC Graduate Research Assistant	0.25	50.00%	50.00%	\$49,050.00	\$12,262.50
CRC Research Assistant Professor	0.33	90.00%	10.00%	\$104,731.00	\$34,561.23
CRC Undergraduate Assistant	0.20	10.00%	90.00%	\$30,510.00	\$6,102.00
Director	0.95	90.00%	10.00%	\$12,065.00	\$11,461.75
Extension Trainer	1.00	100.00%	0.00%	\$3,959.00	\$3,959.00
Grants Resources Specialist	0.75	100.00%	0.00%	\$55,557.00	\$41,667.75
Graphics Designer/Multimedia	0.20	100.00%	0.00%	\$59,040.00	\$11,808.00
Health Educator	18.00	10.00%	90.00%	\$56,309.00	\$1,013,562.00
Multimedia Specialist	0.80	95.00%	5.00%	\$69,854.00	\$55,883.20
			Total SNAP-Ed-fur	nded Salary/Benefits	\$2,777,313.88

Total SNAP-Ed-funded Salary/Benefits

\$2,777,313.88

Position Title	FTE's charged to SNAP-Ed	% of SNAP-Ed Time Spent on Management and Administration	% of SNAP-Ed Time Spent on SNAP-Ed Delivery	Average Full Salary, Benefits, and Wages for Position	Subtotals (FTE × Average Full Salary, Benefits, and Wages)
Nutrition Outreach Instructor	15.00	90.00%	10.00%	\$47,456.00	\$711,840.00
Physical Activity Specialist	0.60	90.00%	10.00%	\$102,804.00	\$61,682.40
Program Coordinator	1.00	90.00%	10.00%	\$68,536.00	\$68,536.00
Program Manager	0.50	90.00%	10.00%	\$82,410.00	\$41,205.00
Public Health Evaluation & Training Specialist	0.50	95.00%	5.00%	\$89,505.00	\$44,752.50
Social Media Specialist	1.00	90.00%	10.00%	\$65,900.00	\$65,900.00
Team Lead Educator	5.00	40.00%	60.00%	\$69,269.00	\$346,345.00
			Total SNAP-Ed-fu	nded Salary/Benefits	\$2,777,313.88

Full-Time Equivalent (FTE) Definition and Basis For Calculation

Full time equivalents are based on a 40-hour work week.

Job Description Documents

Job descriptions_SNAP Ed FY25 (1) pdf

Planned Travel

In State Travel

Daily Travel for Programming

TOTAL TRIP COST

\$44,185.83

Staff positions of Health Educators, Nutriton Outreach Instructors, Team Lead Educators, Multimedia Specialist, Social Media Specialist, Physical Activity Specialist, Director, Co-Director traveled to Various with WV

The purpose/benefit to SNAP-Ed: Nutrition Education

	# of		
	Staff	Units	Total
Mileage	39	\$0.670 per mile x 1691 miles	\$44,185.83

Mid Atlantic SNAP-Ed Regional Meeting

TOTAL TRIP COST

\$1,980.00

Staff positions of Director, Co Director traveled to Hamilton, NJ

The purpose/benefit to SNAP-Ed:

SNAP-Ed Professional development and nutrition education updates, guidelines and expectations. Opportunity to share programmatic wins and failures with colleagues.

Total
\$460.00
\$920.00
\$360.00
\$240.00
\$

Out of State Travel

Active Living Conference (ALC)

TOTAL TRIP COST

\$2,780.00

Staff positions of Director, Physical Activity Specialist traveled to Manhattan, KS

The purpose/benefit to SNAP-Ed: Networking and engagement opportunities for active living researchers and practitioners focused on creating healthier communities for all people

	# of Staff	Units	Total
Air Travel	2	\$410.00 per person	\$820.00
Registration Fee	2	\$200.00 per person	\$400.00
Lodging	2	\$220.00 per day x 3 days	\$1,320.00
Per Diem	2	\$40.00 per day x 3 days	\$240.00

American Public Health Association Conference (APHA)

TOTAL TRIP COST

\$6,240.00

Staff positions of Director, Co-Director, Project Manager, Program Director traveled to Washington, DC

The purpose/benefit to SNAP-Ed: Conference focused toward preention and promotion to enable populations to live longer

	# of Staff	Units	Total
Registration Fee	4	\$400.00 per person	\$1,600.00
Lodging	4	\$225.00 per day x 4 days	\$3,600.00
Ground Transportation	4	\$25.00 per day x 4 days	\$400.00
Per Diem	4	\$40.00 per day x 4 days	\$640.00

ASNNA Conference

TOTAL TRIP COST

\$6,640.04

Staff positions of Director, Co-Director, Project Manager, Program Director traveled to LasVegas, NV

The purpose/benefit to SNAP-Ed: Professional Devlopement

	# of Staff	Units	Total
Air Travel	4	\$500.00 per person	\$2,000.00
Registration Fee	4	\$500.00 per person	\$2,000.00
Lodging	4	\$166,67 per day x 3 days	\$2,000.04

National Health Outreach Conference

TOTAL TRIP COST

\$5,880.00

Staff positions of Director, Co-Director, Project Manager, Program Director traveled to Omaha Nebraska

The purpose/benefit to SNAP-Ed: Research, Extension presentations, and networking conference

	# of Staff	Units	Total
Air Travel	3	\$400.00 per person	\$1,200.00
Registration Fee	3	\$500.00 per person	\$1,500.00
Lodging	3	\$300.00 per day x 3 days	\$2,700.00
Per Diem	3	\$40.00 per day x 4 days	\$480.00

North America Social Marketing conference (NASMC)

TOTAL TRIP COST

\$4,920.00

Staff positions of Multimedia Specialist, Social Media Specialist traveled to San Diego, CA

The purpose/benefit to SNAP-Ed: Conference geared towards social and neuromarketing techniques

	# of Staff	Units	Total
Air Travel	2	\$600.00 per person	\$1,200.00
Registration Fee	2	\$500.00 per person	\$1,000.00
Lodging	2	\$300.00 per day x 4 days	\$2,400.00
Per Diem	2	\$40.00 per day x 4 days	\$320.00

Budget Narrative

For the plan fiscal year, a total of \$4,120,759.00 is needed to cover SNAP-Ed operating costs, including \$3,451,195.00 in direct costs and \$669,564.00 in indirect costs. Unobligated funds from the previous FY in the amount of \$0.00 will be used to cover the costs of operating SNAP-Ed before \$4,120,759.00 from the plan fiscal year allocation are used.

File Attachments: WVU-WVURC Rate Agreement FY 2025 (1).pdf

Salary/Benefits

The total amount required for salary/benefits is \$2,329,532.00.

\$1,808,150 Salary expenses for the sixty-five (65) SNAP-Ed personnel that will participate in SNAP-Ed programming and administration for FY25. For vacant positions, an average salary of previously filled position salaries was used for this budget.

\$521,382 Fringe fringe benefits costs for all personnel using the WVU/WVURC FY25 fringe benefit rate sheet

WVU Research Corp Full-Time Employee Benefits

31.8% of \$1,242,354 = \$395,068

0	Social Security/Medicare:
٥	Workers' Compensation:

• <u>Unemployment Compensation:</u>

• <u>Insurance:</u>

<u>Retirement:</u><u>Terminated Annual Leave Payout:</u>

7.23% of \$**1,242,354** = \$89,822 0.12% of \$**1,242,354** = \$1,491

0.36% of \$**1,242,354** = \$4,472

18.28% of \$**1,242,354** = \$227,102

5.19% of \$**1,242,354** = \$64,478

0.62% of \$1,242,354 = \$7,703

WVU Full-time Employee Fringe Benefits

Social Security/Medicare:

Worker's Compensation:

· <u>Unemployment Compensation:</u>

Insurance:

Retirement:

Terminated Annual Leave Pay-out:

0.06% of **\$500,038**= \$300 8.72% of **\$500,038**= \$43,603

23% of \$500,038 = \$115,009

5.99% of \$500,038= \$29,952

0.48% of \$500,038= \$2,400

6.99% of \$500,038= \$34,953

0.20% of \$500,038= \$1,000

Graduate Assistant Fringe Benefits

Social Security/Medicare:

· Workers' Compensation:

Insurance:

9.00% of \$36,050 = \$3,244

0.65% of \$36,050 = \$234

0.17% of \$36,050 = \$61

8.18% of \$36,050 = \$2,949

WVU Non-Benefits Eligible Fringe Benefits

Social Security/Medicare:

Worker's Compensation

Unemployment Compensation

6.80% of \$20,000 = \$1,360

6.74% of \$20,000 = \$1,348

0.03% of \$20,000 = \$6

0.03% of \$20,000 = \$6

Student Worker Fringe Benefits

Social Security/Medicare:

Worker's Compensation:

1.70% of \$6,000= \$102

1.53% of \$6,000 = \$92

0.17% of \$6,000 = \$10

Contracts/Sub-Grants/Agreements

The total amount required for **contracts/sub-grants/agreements** is \$975,948.00. Contracts/Sub-Grants/Agreements: \$975,948

- (4) subcontracts (Retain copies of agreements on site)
- \$558,817 Marshall University
- \$108,379 KEYS 4 Healthy Kids (CAMC)
- \$170,111 WV Food and Farm Coalition
- \$138,641 WVU Parkersburg

Sub-grantees have been chosen based on the ability to deliver programming in areas that are under served by WVU Extension programming. A listing of each sub-grantees is provided above. Detailed budget information for each subcontractor can be found following this narrative.

Non-Capital Equipment/Office Supplies

The total amount required for **non-capital equipment/office supplies** is **\$0.00**. Nutrition Education Materials:

\$72,589 is the amount requested for FY25 supplies:

\$2,551 Nutrition Education Materials

- \$855 postage to mail educational materials.
- \$421 Office supplies
- \$1,275 electronic media equipment for filming educational videos

\$9,936 Health Educator Supplies (\$276 x 36 Educators)

Costs for supplies and materials needed to deliver educational programming

\$30,000 Direct Education Class Enhancements (\$833 x 36 Educators)

Nutrition education enhancements and reinforcements will be used in classrooms and during community programming

\$26,102 Training

Annual training program for FNP educators and staff

35-40 participants for a 3-day training session

- \$4,180 meetings space with A/V services: AV cart with surge protectors, extension cord and screen, Flip chart package with stand, paper and markers, handheld wired microphone, set up and break down.
- \$4,116 Breakfast and Lunch buffets: Breakfast and lunch provided in a buffet style that includes, various breakfast options, salad bar, soups, pastas, bread, seasonal vegetables, all day beverage, vegetarian and food allergens meals. Per diem reimbursement provided only for meals not provided during the training.
- \$17,156 Lodging (40 rooms x 3-nights x \$163 each),
- \$650 Supplies, name tags, pens, markers, highlighters, flip charts

\$4,000 New computers

Three (3) replacement laptops for staff. Laptops being replaced due to warranty expiration.

Nutrition Education Materials

The total amount required for nutrition education materials is \$72,589.00.

\$44,186 in-state travel

Mileage 65,949 miles @ \$0.67

\$28,440 Out of State travel

 ASNNA Cor 	nference	Las Vegas, NV x 4 ppl	\$6,640
 Registration 	ì	\$500	\$2,000
 Transportat 	ion	\$500 x 4	\$2,000
 Lodging 		\$166 x 3 nights	\$2,000
Meals per d	iem	\$40 x 4 days	\$ 640

National Health Outreach Conference (NHOC)
 \$7,840 Omaha Nebraska x 4ppi

 Registration 	\$500	\$2,000
 Air fare 	\$400	\$1,600
 Lodging 	\$300 x 3 nights	\$3,600
 Per diem 	\$40 x 4 days	\$ 640

North America Social Marketing Conference (NASMC) \$4,920 San Diego, CA (Feb) x 2ppl

0	Registration	\$500	\$1,000
0	Air fare	\$600	\$1,200
0	Lodging	\$300 per night x 4	\$2,400
0	Per diem	\$40 per day x 4	\$ 320

0

 Active Living Conference (ALC)
 \$2,640
 Manhattan, KS x 2 ppl

 Registration
 \$200
 \$400

 Air Fare
 \$400
 \$800

 Lodging
 \$200 per night x 3 nights
 \$1,200

 Per Diem
 \$40 per day x 3 days
 \$240

0

American Public Health Association Conference (APHA) \$6,400

Washington, DC x 4 ppl

Registration \$400 x 4 \$1,600
 Rental Car and Fuel \$100 x 4 \$400
 Lodging \$225 per night x 4 x 4 \$3,600
 Per diem \$50 per day x 4 x 4 \$800

Travel

The total amount required for travel is \$72,626.00.

- Planned number of <u>In-State</u> trips: 2
- · Planned number of Out-of-State trips: 5

Building/Space Lease or Rental

The total amount required for **building/space lease or rental** is **\$0.00**. NA

Cost of Publicly-Owned Building Space

The total amount required for **cost of publicly-owned building space** is **\$0.00**. NA

Maintenance and Repair

The total amount required for **maintenance and repair** is \$0.00. NA

Institutional Memberships and Subscriptions

The total amount required for **institutional memberships and subscriptions** is **\$500.00**. ASNNA Annual Membership Dues for up to five (5) SNAP-Ed personnel

Equipment and Other Capital Expenditures

The total amount required for **equipment and other capital expenditures** is \$0.00. NA

Planned Staffing and Budget

West Virginia Department of Human Services (State Agency) Budget

Total Agency Budget

Agency Budget Summary	SNAP-Ed Planned Cost @	Other Planned Funding @
1. Direct Cost	\$0.00	\$0.00
a. Salary/Benefits 🕖	\$0.00	\$0.00

Agency Budget Summary	SNAP-Ed Planned Cost @	Other Planned Funding ②
b. Contracts/Sub-Grants/Agreements	\$0.00	\$0.00
c. Non-Capital Equipment/Office Supplies 🕝	\$0.00	\$0.00
d. Nutrition Education Materials 😯	\$0.00	\$0.00
e. Travel 😯	\$0.00	\$0.00
f. Building/Space Lease or Rental	\$0.00	\$0.00
g. Cost of Publicly-Owned Building Space 😯	\$0.00	\$0.00
h. Maintenance and Repair	\$0.00	\$0.00
i. Institutional Memberships and Subscriptions 🔞	\$0.00	\$0.00
j. Equipment and Other Capital Expenditures 🚱	\$0.00	\$0.00
 Indirect Costs, not including building space/ contracts/subgrants/agreements ② 	\$0.00	\$0.00
▼ SNAP-Ed Indirect Cost Explanation Indirect cost rate: 0.00% N/A		
▼ Other Indirect Cost Explanation Indirect cost rate: 0.00% N/A		
. Total Federal Funds for Agency Direct Cost + Indirect Costs	\$0.00	\$0.00

Funding Source	Total Funds (\$)
Estimated unobligated balance/carry-over from previous FY for Agency	\$0.00
2. Funds requested from current FY allocation for Agency Total Federal Funds - Estimated unobligated balance/carry-over from previous FY	\$0.00
3. Total Federal Funds for Agency	\$0.00

Direct Cost Breakdown

Project Budgets

No project budgets submitted.

Other SNAP-Ed Planned Expenditures

\$0.00	Salary/Benefits
\$0.00	Contracts/Sub-Grants/Agreements
\$0.00	Non-Capital Equipment/Office Supplies
\$0.00	Nutrition Education Materials
\$0.00	Travel
\$0.00	Building/Space Lease or Rental

		/u
\$0.00	Cost of Publicly-Owned Building Space	
\$0.00	Maintenance and Repair	
\$0.00	Institutional Memberships and Subscriptions	
\$0.00	Equipment and Other Capital Expenditures	
\$0.00	Total Direct Cost	

Planned Staffing

Staff Positions

als (FTE × full Salary, d Wages)	Average Full Salary, Benefits, and Wages for Position	% of SNAP-Ed Time Spent on SNAP-Ed Delivery	% of SNAP-Ed Time Spent on Management and Administration	FTE's charged to SNAP-Ed	Position Title
\$0.00	\$0.00	0.00%	0.00%	0.00	N/A
\$0.00	unded Salary/Benefits	Total SNAP-Ed-f			

Full-Time Equivalent (FTE) Definition and Basis For Calculation

Job Description Documents

Wv DOHS attestation.docx

Planned Travel

In State Travel

No data submitted

Out of State Travel

No data submitted

Budget Narrative

For the plan fiscal year, a total of \$0.00 is needed to cover SNAP-Ed operating costs, including \$0.00 in direct costs and \$0.00 in indirect costs. Unobligated funds from the previous FY in the amount of \$0.00 will be used to cover the costs of operating SNAP-Ed before \$0.00 from the plan fiscal year allocation are used.

Salary/Benefits

The total amount required for **salary/benefits** is **\$0.00**. N/A

Contracts/Sub-Grants/Agreements

The total amount required for contracts/sub-grants/agreements is \$0.00. N/A.

Non-Capital Equipment/Office Supplies

The total amount required for **non-capital equipment/office supplies** is **\$0.00**. N/A.

Nutrition Education Materials

The total amount required for **nutrition education materials** is \$0.00. N/A

Travel

The total amount required for travel is \$0.00.

- Planned number of In-State trips: 0
- Planned number of Out-of-State trips: 0

Building/Space Lease or Rental

The total amount required for building/space lease or rental is 0.00. N/A

Cost of Publicly-Owned Building Space

The total amount required for ${f cost}$ of ${f publicly-owned}$ building ${f space}$ is \$0.00. N/A

Maintenance and Repair

The total amount required for **maintenance and repair** is \$0.00. N/A

Institutional Memberships and Subscriptions

The total amount required for **institutional memberships and subscriptions** is \$0.00. N/A

Equipment and Other Capital Expenditures

The total amount required for **equipment and other capital expenditures** is **\$0.00**. N/A