

SNAP-Ed Guiding Principles

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In 2007, FNS developed Guiding Principles that characterize its vision of quality nutrition education and address the nutrition concerns and food budget constraints faced by those eligible for SNAP. These Guiding Principles have been updated to reflect the definitions of nutrition education and obesity prevention services, and evidence-based activities that stem from the FNA.

States are strongly encouraged to use these Guiding Principles as the basis for SNAP-Ed activities in conjunction with the SNAP-Ed goal and behavioral outcomes. States may focus their efforts on other interventions based on the *Dietary Guidelines for Americans* that address their target audiences providing justification and rationale in their SNAP-Ed Plans.

FNS encourages State agencies to conduct SNAP-Education activities from any level of the *Dietary Guidelines for Americans Socio-ecological Framework for Nutrition and Physical Activity Decisions* to implement their projects and expects that States include one or more approach(es) in addition to individual or group-based nutrition education, health promotion, and intervention strategies. FNS expects States to coordinate activities with partners using strategies from multiple spheres of the framework to further mutual efforts and maximize resources.

The six SNAP-Education Guiding Principles are as follows.

The SNAP-Education Program:

1. Is intended to serve SNAP participants and low-income individuals eligible to receive SNAP benefits or other means-tested Federal assistance programs.

This SNAP-Education principle supports the overall goal of SNAP, which is to provide eligible low-income households with nutrition benefits to ensure that they have access to an adequate diet. Persons who participate in the formal SNAP certification process (e.g., SNAP participants) are the only persons known with certainty to meet criteria for participation in the program. As such, SNAP participants, who are among the Nation's neediest people, are at the core of SNAP-Education efforts. Because persons eligible for SNAP may participate in FDPIR as an alternative to SNAP, FDPIR participants are considered eligible to receive SNAP-Education. FDPIR provides USDA foods to low-income households, including the elderly, living on Indian reservations, and to Native American families residing in approved areas near reservations and in the State of Oklahoma.

FNS is committed to providing eligible low-income individuals with the opportunity to receive SNAP-Education. The Agency has determined that the population eligible for SNAP-Education is SNAP participants and low-income individuals eligible to receive SNAP benefits or other means-tested Federal assistance. This definition more closely aligns SNAP-Education with other FNS, Federal, and State-administered benefit programs, allowing the focus to remain on the low-income population while also permitting a greater reach to persons residing in communities with a significant low-income population.

Certain settings offer a high likelihood of reaching individuals eligible for SNAP-Education and are appropriate locations for SNAP-Education delivery. Such venues include but are not limited to SNAP or Temporary Assistance for Needy Families (TANF) offices, public housing sites, food banks, job readiness or training programs for SNAP/TANF recipients.

States may deliver SNAP-Education to the target population through other venues if the audience meets the general low-income standard (i.e. > 50 percent of persons have household incomes of < 185 percent of the Federal Poverty Guidelines). Examples of such venues may include schools, childcare centers, Summer Food Service Program sites, WIC clinics, community centers, and grocery stores. **For other venues than those previously described, States must prorate SNAP-Education's share of the total cost based on the estimated number of the SNAP-Education target audience that may receive SNAP-Education.** Details pertaining to cost accounting are described in Section 3, *Financial and Cost Policy*. States may submit project plans for approval that include alternate delivery sites for SNAP-Education activities and

interventions that do not meet the general low-income standard described above for FNS consideration. The plans must propose and describe reasonable methodology the State will use to determine the proportion of the low-income target audience that may be reached.

FNS encourages State agencies to communicate with a variety of State SNAP staff, WIC, and CNP staffs to assist in identifying low-income persons who may be eligible for SNAP-Ed. Coordinating activities with other Federal, State, and community efforts may enhance targeting efforts.

2. Includes nutrition education and obesity prevention services consisting of any combination of educational strategies, accompanied by environmental supports, designed to facilitate voluntary adoption of food and physical activity choices and other nutrition-related behaviors conducive to the health and well-being of SNAP participants and low-income individuals eligible to participate in SNAP and other means-tested Federal assistance programs. Nutrition education and obesity prevention services are delivered through multiple venues and involve activities at the individual, community, and appropriate policy levels. Acceptable policy level interventions are activities that encourage healthier choices based on the current *Dietary Guidelines for Americans*.

This SNAP-Ed definition focuses on the needs of the low-income population eligible for SNAP and recognizes that environmental support, in addition to educational strategies, are necessary to have an impact on nutrition and physical-activity related behaviors. The definition emphasizes that policy level interventions in SNAP-Ed are based on the *Dietary Guidelines for Americans* and encourages delivery of nutrition education and obesity prevention activities through multiple channels at a variety of levels as described in the *Dietary Guidelines for Americans* Socio-ecological Framework. **FNS expects that interventions will be conducted through an individual or group-based approach and at least one other approach.**

Interactive groups, one-on-one instruction, and social marketing campaigns have traditionally been the approaches used to deliver nutrition education to the SNAP-Ed audience. **Social marketing is defined as a disciplined, consumer-focused, research-based process to plan, develop, implement, and evaluate interventions, programs and multiple channels of communications designed to influence the voluntary behavior of a large number of people in the target audience.** Social marketing may be an important component of some SNAP-Ed interventions and may target the individual, organizational/institutional, and societal levels. This approach emphasizes:

- Targeting an identified segment of the SNAP-Ed eligible audience;
- Identifying nutrition needs of the target audience and associated behaviors and perceptions about reasons for and against changing behavior; and
- Interacting with the target audience to test the message, materials, approach, and delivery channel to ensure that these are understood and meaningful (are likely to lead to behavior change).

FNS recognizes the potential impact environmental factors such as institutional policy, neighborhood design, food access, and advertising may have on eating and physical activity behaviors. **FNS expects States to incorporate policy, systems, and environmental change**

interventions into their SNAP-Ed Plans. These activities are most effective if they are part of collaborative efforts with other national, State, or local efforts. Policy, systems, and environmental change interventions must be directed to the low-income SNAP-Ed target population and be implemented such that the FNS mission and the goal and focus of SNAP-Ed are considered.

SNAP-Ed can help support State environmental changes, which target the low-income SNAP-Ed target population, through examples such as these:

- Health promotion efforts e.g. promoting use of a walking trail, selection of healthy foods from vending machines;
- Working with schools on smarter lunchroom efforts
- Serving on relevant nutrition and/or physical activity-related State and local advisory panels such as food policy councils, school wellness committees, and SNACs;
- Providing training to retailers in low-income areas on healthy foods to stock;
- Working with a local food policy council on a healthy food financing initiative;
- Helping local workplaces establish policies for healthy food environments;
- Educating and assisting low-income community members on starting a community garden.

Areas that, in general, fall outside the Agency’s “reasonable and necessary” criteria (see Section 3, *Financial and Cost Policy*) and would not be allowed include funding for infrastructure changes, like purchasing capital equipment or building sidewalks, and organized efforts to influence elected officials or lobbying for legislative/policy changes.

Interventions Toolkit: To help States identify evidenced-based obesity prevention policy, systems, and environmental change interventions, FNS developed an intervention toolkit. *SNAP-Ed Strategies and Interventions: An Obesity Prevention Toolkit for States* is a package of off-the-shelf options that can be readily adopted by SNAP-Ed State agencies and providers and are highly likely to produce positive outcomes. The toolkit provides existing, proven effective and actionable tools that embody community-based and public health approaches to nutrition education and obesity prevention, consistent with the context and policies of SNAP.

In developing the toolkit, FNS sought to include interventions best suited for SNAP-Ed, namely those that are proven effective, are consistent with SNAP-Ed policy and practice, and are suitable for the low-income population. The interventions included in the toolkit are drawn from the extensive public health research base, existing interventions, and other resources developed by CDC and others. FNS engaged NCCOR in its development to help ensure the selection of evidence-based interventions.

The toolkit is not an exhaustive compilation of potential strategies and interventions that are appropriate for SNAP-Ed. Rather, FNS is offering the toolkit as a starting point for ideas that States may use to further their obesity prevention efforts through SNAP-Ed. FNS sees the toolkit as a dynamic resource that will have supplementary content added to it as more evidence-based strategies and interventions that are appropriate for use with the low-income SNAP population are identified. The toolkit was updated in July 2013 with additional strategies and interventions. States are encouraged to engage partners as they embark on

expanding their nutrition education and obesity prevention activities. States are advised that these, as with other strategies and interventions States include in their SNAP-Education Plans, are subject to Regional Office approval. The toolkit can be found on the SNAP-Education Connection at [SNAP-Education Connection](#).

3. Has the greatest potential impact on the nutrition-related behaviors of the overall SNAP low-income population when it targets low-income households with SNAP-Education eligible women and children.

To maximize SNAP-Education funding, FNS continues to encourage States to focus their resources on changing the nutrition and physical-related behaviors of key subsets of the SNAP population within the broader SNAP-Education target population. Specifically, FNS encourages targeting first women, and then children in households participating in SNAP.

Many view women as gatekeepers of what food is purchased. A survey by the American Dietetic Association Foundation reports on the key role mothers have as models for their children's eating habits.⁴ Parents point out that children and teenage youth affect family grocery and meal choices.⁵ Together, mothers and their children make or influence food purchases and meal decisions.

Targeting SNAP-Education to women and children captures a majority of SNAP recipients. In FY 2011, 19 percent of SNAP participants, or almost 8 million, were women living in households with children. An additional 45 percent of participants were children⁶.

Targeting these two groups is also important to address obesity. According to data from the National Health and Nutrition Examination Survey, 2009–2010, more than one-third of adults (35.7 percent) and almost 17 percent of children and adolescents aged 2–19 years were obese in 2009–2010. Reaching children is particularly important because as stated in *Nutrition Insight*, “The quality of children’s and adolescents’ diets is of concern because poor eating patterns established in childhood may transfer to adulthood. Such patterns are major factors in the increasing rate of childhood obesity over the past decades and are contributing factors to related health outcomes. In addition, nutrition-related diseases that were once considered adult illnesses, such as type 2 diabetes and high blood pressure, are increasingly diagnosed in children.”⁷

FNS recognizes that programs such as WIC, CACFP, and the Expanded Food and Nutrition Education Program (EFNEP), also target women and children, to varying degrees. This shared targeting provides an opportunity to reinforce and build upon nutrition and physical activity-related education messaging across programs using multiple sources. FNS believes that this will increase the likelihood of positive changes in eating and other nutrition-related behaviors for a significant portion of the SNAP population and that effective SNAP-Education intervention will duplicate this national focus. Furthermore, SNAP-Education activities for children,

⁴ “Children’s Role Models for Health: Parents Outrank Others.” Survey by American Dietetic Association Foundation, January 2003.

⁵ Kraak, V. *The Influence of Commercialism on the Food Purchasing Behavior of Children and Teenage Youth*. *Family Economics and Nutrition Review*. 1998, 11 (3): 15-24.

⁶ U.S. Department of Agriculture, Food and Nutrition Service, Office of Research and Analysis, *Characteristics of Supplemental Nutrition Assistance Program Households: Fiscal Year 2011*, by Mark Strayer, Esa Eslami, and Joshua Leftin. Project Officer, Jenny Genser. Alexandria, VA: 2012

⁷ *Nutrition Insight* 43, U.S. Department of Agriculture, Center for Nutrition Policy and Promotion, April 2009

that include related parental activities, hold greater promise of success because they reinforce messages in the home setting.

FNS' national focus on women and children does not preclude States from also offering SNAP-Education to other SNAP audience segments such as the elderly, men, or adults without children. A needs assessment of the SNAP-Education target population will help States focus SNAP-Education effectively and efficiently to yield the greatest change in nutrition and physical activity-related behavior among the targeted population.

4. Uses evidence-based, behaviorally focused interventions and can maximize its national impact by concentrating on a small set of key local outcomes and/or environmental or policy-level interventions.

Evidence-based interventions based on the best available information must be used. This Guiding Principle clarifies the meaning of “evidence-based” to reflect FNS' expectation that SNAP-Education operators focus on the following:

- Demonstrate through research review or sound self-initiated evaluation, if needed, that interventions have been tested and demonstrated to be meaningful for their specific target audience(s), implemented as intended or modified with justification, and shown to have the intended impact on behavior;
- Incorporate general education features that have shown to be effective such as:
 - Behaviorally-focused messages;
 - Motivators and reinforcements that are personally relevant to the target audience;
 - Multiple channels of communication to convey messages;
 - Approaches that provide for active personal engagement; and
 - Intensity/duration that provide the opportunity for multiple exposures to the message.
- Consider practice-based interventions.

Where rigorous reviews and evaluations are not available, practiced- based evidence may be considered. FNS defines practice-based evidence as case studies, pilot studies, and evidence from the field on nutrition education interventions that demonstrate obesity prevention potential. Practice-based interventions provide emerging evidence and results of efforts such as State and/or community-based programs that show promise. Information from these types of interventions may be used to build the body of evidence for promising SNAP-Education interventions. States should provide justification and rationales for implementation of projects built upon practice-based evidence and **describe plans to evaluate these interventions.**

To magnify the impact of SNAP-Education, **FNS encourages States to concentrate their SNAP-Education efforts on the SNAP-Education Key Behavioral Outcomes described earlier under SNAP-Education Goals and Focus.** These behaviors are associated with a reduced risk of some forms of cancer, type 2 diabetes, and coronary heart disease. The focus on the Key Behavioral Outcomes for

the SNAP-Ed population is appropriate since low-income individuals often experience a disproportionate share of obesity and diet-related problems that are risk factors in the major diseases contributing to poor health, disability, and premature death. **Other evidence-based activities including policy, systems, and environmental change interventions delivered through multiple approaches that are consistent with the *Dietary Guidelines for Americans* and consider the FNS mission and the goal and focus of SNAP-Ed should be submitted for approval as well.**

5. Can maximize its reach when coordination and collaboration takes place among a variety of stakeholders at the local, State, regional and national levels through publicly or privately-funded nutrition intervention, health promotion, or obesity prevention strategies.

The likelihood of nutrition education and obesity prevention interventions successfully changing behaviors is increased when consistent and repeated messages are delivered through multiple channels.

Cross-program coordination and collaboration at the State and community levels include working together, particularly with other FNS programs, toward common goals to reinforce and amplify each other's efforts. Collaborative projects necessitate commitments of staff support and time, and leverages funds among all involved entities. **Please refer to the Coordination and Collaboration Requirements described earlier in this section for additional information.**

To further support healthy lifestyles, State agencies are encouraged to provide wellness training for human service professionals to increase their awareness of healthy eating and active living so that they may serve as role models for the population being taught as well as for general overall health in their professions. Such training would not be a cost of SNAP-Ed per se, but would be an allowable SNAP administrative cost similar to other training or personnel benefits.

6. Is enhanced when the specific roles and responsibilities of local, State, regional and national SNAP agencies and nutrition education providers are defined and put into practice.

Providing nutrition education and obesity prevention services to the SNAP-Ed target audience requires the cooperation and ongoing communication between Federal, State, and local entities and the recognition that each of these sets of organizations has key roles and responsibilities as noted below. FNS also recognizes that there are many roles and responsibilities, such as program development, financial management, and training, which are common at all levels of SNAP-Ed operations.

FNS, USDA:

Establishes SNAP-Ed policy and develops related guidelines and procedures, intervention programs, and activities that address the highest priority nutrition problems and needs of the target audiences.

Allocates to State SNAP agencies 100 percent funding for allowable, reasonable, and necessary SNAP-Ed costs.

Reviews and approves State SNAP-Ed Plans.

Monitors State SNAP-Ed projects.

Leads the coordination of nutrition education and obesity prevention related efforts at the national and regional levels,

including partnerships with other Federal agencies, appropriate national organizations, and other public and private entities to address national priorities.

Promotes and supports cross program collaboration and planning at State and local levels to ensure implementation of consistent and effective interventions.

Consults with the Director of the CDC and outside experts and stakeholders.

Aligns SNAP-Ed messages with all other FNS nutrition assistance program messages.

Provides technical assistance to program providers at all levels including linking staff with appropriate resources.

Develops and provides nutrition education materials for use with the SNAP-Ed target audience.

Oversees the collection and analysis of national SNAP-Ed data.

State SNAP Agency:

Works collaboratively across State agencies, especially those administering other FNS Programs and with other appropriate agencies to promote healthy eating and active living among the SNAP-Ed target population.

Develops a coordinated, cohesive State SNAP-Ed Plan that addresses national and State priorities and links SNAP-Ed to SNAP benefits.

Provides leadership, direction, and information to entities contracted to provide SNAP-Ed services to ensure that SNAP-Ed appropriately serves the SNAP-Ed audience and is consistent with SNAP-Ed policies.

Submits a unified State SNAP-Ed plan to FNS and provides assurances that Plan activities comply with SNAP-Ed policies.

Incorporates the *Dietary Guidelines for Americans* and the USDA Food Guidance System into FNS nutrition assistance programs.

Promotes evidence-based decisions through technical assistance, standards for research, and support for sound and systematic evaluation.

Submits a final SNAP-Ed performance report to FNS each year.

Monitors implementation of the State's approved SNAP-Ed Plan including allowable expenditures.

Offers training to State/local office human services staff on the availability of SNAP and SNAP-Ed services.

Provides budget information to FNS as required.

Collects and reports data regarding participation in SNAP-Ed and characteristics of those served.

Considers offering wellness training to State/local office human services professionals.

State SNAP-Ed Provider:

Works with State SNAP agency, other FNS Programs, and other SNAP-Ed providers within the State to develop a single comprehensive State SNAP-Ed Plan that addresses national/State priorities and needs of the SNAP-Ed audience, and includes sound evaluation strategies.

Works with other State and local agencies and with private agencies to promote healthy eating and active living among the SNAP-Ed population.

Implements evidence-based nutrition education and obesity prevention efforts as specified in the approved State SNAP-Ed plan.

May coordinate and collaborate with other State nutrition education and obesity prevention programs, especially those recognized by or receiving support from CDC.

Submits required reports according to timelines established by the State SNAP agency.

Works with the State SNAP agency to provide information to State/local office human services staff on the availability of SNAP-Ed services.

Collects and reports data regarding participation in SNAP-Ed and characteristics of those served.

Local SNAP Office:

Informs SNAP participants and applicants of opportunities to participate in SNAP services, including SNAP-Ed.

Builds relationships with other local service providers (WIC, local health departments, and school meals programs) so referrals of SNAP participants to other nutrition and health related services can be made as appropriate.

As space and resources allow, makes SNAP-Ed information and services available in the SNAP office.

Coordinates opportunities between SNAP and SNAP-Ed efforts, as appropriate and available.

Participates in worksite wellness activities or community-based wellness programs, as appropriate and available.

Local SNAP-Ed Provider

Delivers nutrition education and obesity prevention services to the SNAP audience according to approved SNAP-Ed plan.

Helps the SNAP-Ed audience understand how to eat a healthy diet on a limited food budget using SNAP benefits and managing their food resources.

Uses appropriate educational strategies and implementation methods to reach the SNAP-Ed population.

May coordinate and collaborate with other local nutrition education and obesity prevention programs, especially those recognized by or receiving support from USDA and CDC.

Collects and reports data to the State SNAP agency regarding participation in SNAP-Ed and characteristics of those served.

Builds relationships with other local service providers (WIC, local health departments, childcare, school meals programs, etc.) so referrals of SNAP participants to other nutrition and health related services can be made as appropriate.

Provides referrals to SNAP for low-income non-participants to access SNAP benefits, as appropriate.