

# FY 2018 Statewide Needs Assessment

## Pennsylvania SNAP-Ed

### NEEDS ASSESSMENT METHODOLOGY

This needs assessment is prepared with the assumption that information in reports and databases is accurate, i.e. respondents answered to the best of their knowledge and database development and analyses were free of recording errors.

#### A. Existing Information:

Demographic and health-related behavior data were compiled from several sources to assess nutrition education needs of Pennsylvanians receiving or eligible to receive benefits from the Supplemental Nutrition Assistance Program (SNAP). In Pennsylvania (PA), SNAP is administered by the PA Department of Human Services (DHS). The Pennsylvania State University (PSU) is contracted by DHS to manage and implement the approved SNAP-Ed Plan, which is known as Pennsylvania Nutrition Education Tracks (TRACKS). DHS provided the information on selected characteristics of PA SNAP recipients. See *References* at the end of this document for data sources.

#### B. New Information:

*Setting the Table: A Blueprint for a Hunger-free PA* is the report published by the Governor's Food Security Partnership. The Report outlines nine goals to achieve by 2020. See the Implications section of this needs assessment for discussion about PA SNAP-Ed's role in addressing these goals.

- Every county and/or region in Pennsylvania will have a local food alliance to combat hunger in their local communities.
- The SNAP participation rate will increase from 90 percent to 98 percent or higher.
- The number of children benefiting from free and reduced price meals during the school year (linked to nutrition programs in summer) will increase from 20 percent to 30 percent.
- Sixty percent of students benefiting from free and reduced priced school meals will participate in school breakfast. This is an increase from 47 percent in 2014-15.
- The Women, Infants, and Children (WIC) Farmers' Market Nutrition Program redemption rate will increase from 308,000 to 340,000 checks annually.
- Double SNAP Bucks will be available at all highly accessible, high-need farmers' markets, and additional SNAP recipients will have access to SNAP employment and training and SNAP education.
- Pennsylvanians will have streamlined access to food security information and benefits.
- The average number of people participating in WIC programs will increase from over 245,000 to 260,000.
- Pennsylvania will improve access to healthy, nutritious food.

### NEEDS ASSESSMENT FINDINGS

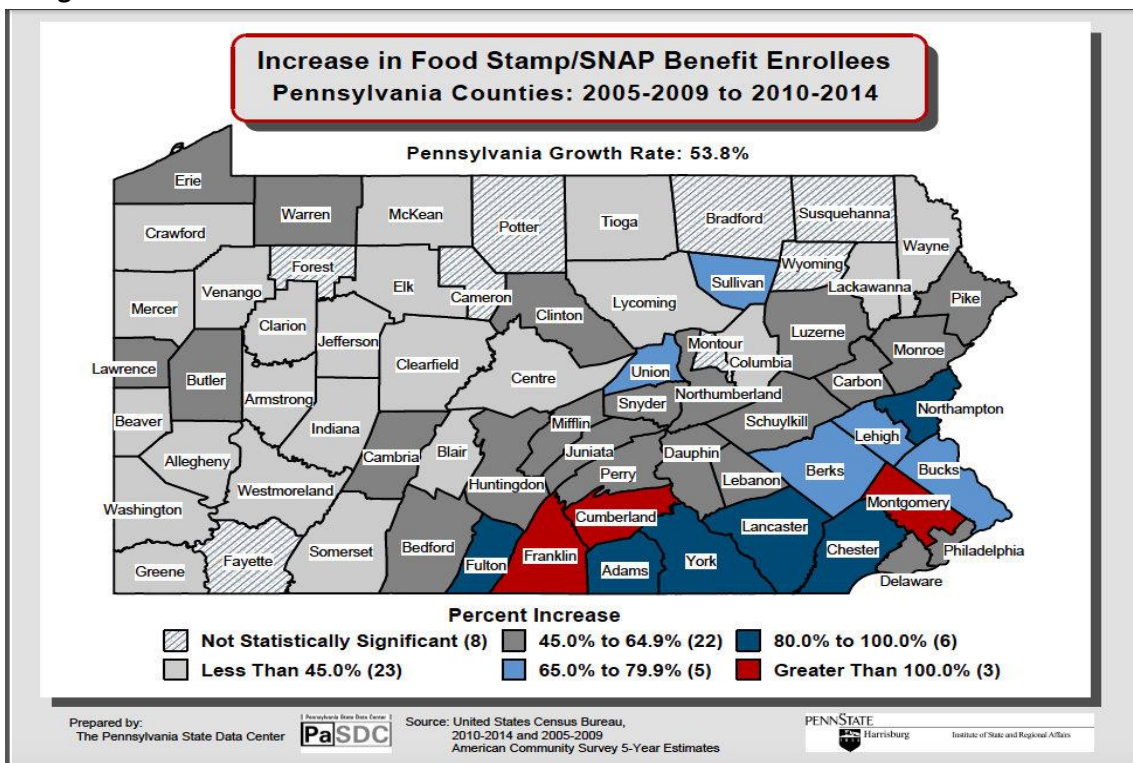
#### 1. Demographic Characteristics of SNAP Target Audience in PA.

- Geographically, PA is largely rural with significant urban populations concentrated in Philadelphia, Pittsburgh, and Harrisburg.
- According to the U.S. Census Bureau's 2013 Current Population Survey results (2009 data in parenthesis), 12.4% (11.1%) of Pennsylvanians are living below poverty, and approximately 17.1% (14.5%) are living below 125% of poverty. In addition, 43.3% (32%) of Pennsylvanians in families composed of a single female householder with children are living below poverty, and 53.1% (41.3%) are living below 125% of poverty<sup>4</sup>.

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- Poverty rates in PA are dramatically different between races. For 2014, the rates are 10.6%, white alone; 29.5%, black alone; and 31.8% for Hispanic/Latino<sup>5</sup>.
- 2014 data from the U.S. Census Bureau show that in the Philadelphia area 30.5% of all families with children under 18 and 36.6% of families headed by a single female with children under the age of 18 live in poverty<sup>5</sup>. 2014 data show that 25.6% of Philadelphians live below 100% of the poverty level<sup>5</sup>.
- According to a northeast PA Community Health Assessment, the \$10,000-\$19,000 level of income for Lackawanna County was the most selected response (26.7%), In Luzerne County the most selected income level was less than \$10,000 (23.1%)<sup>6</sup>.
- In Erie County (northwest PA), 27.9% of all households had income below \$25,000. Poverty levels were higher for Black (40.6%) and Hispanic (40.6%) compared to White (14.2%)<sup>7</sup>.
- Since 2000-2001 the total number of SNAP eligible persons in PA increased by over 100% and by 7.6% between March 2011 (1,753,132) and March 2016 (1,886,275)<sup>8</sup>. See Figure 1.

**Figure 1. Increase in SNAP Benefit Enrollees**

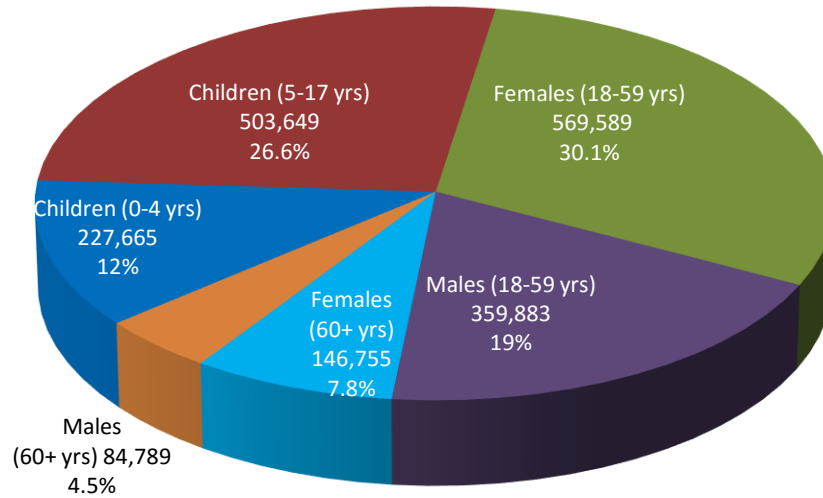


- Based on 2015 estimated population and SNAP eligible data 14.8% of the state population is SNAP eligible. Philadelphia County has the highest percentage of SNAP eligibles at 32.5% followed by Fayette (23.2%), Erie (20.5%), and Luzerne (18.2%)<sup>5, 9</sup>.
- As of March 2016, 26.2% of Pennsylvania SNAP eligibles are from Philadelphia County and 8.5% are from Allegheny County (Pittsburgh area)<sup>8</sup>.
- Pennsylvania's overall unemployment rate is 4.9% (March 2016). Philadelphia County's unemployment rate of 6.7% is higher than the overall unemployment rate for PA. The highest rates of unemployment are generally noted in rural counties such as Forest (9.0%), Fayette (8.8%), and Potter (8.8%)<sup>10</sup>.
- The five PA counties with the highest child food insecurity levels include Fayette (25.1%) followed by Forest (24%) and Cameron (23.9%). The 2014 state rate is 19.3% and the national rate is 20.9%<sup>11</sup>.

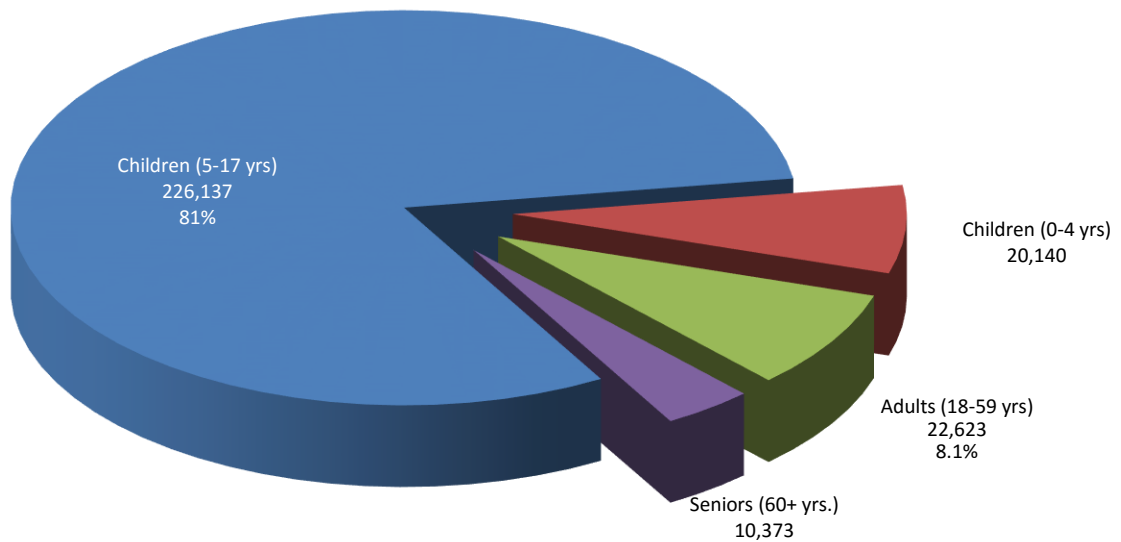
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- The 2014 national average food insecurity rate is 15.4% and the state rate is 13.8%. Philadelphia County is 21.7%, followed by Forest (15.5%), Cameron (15.4%), and Fayette (15.2%) Counties <sup>11</sup>.
- As shown in Figure 2 (November 2015), adult females aged 18-59 represent the largest proportion (30.1%) of SNAP eligibles, followed by school-age children (26.6%), males aged 18-59 years (19%), preschool-age children (12%), and senior adults (12.2%)<sup>9</sup>.
- As shown in Figure 3, school-age children represent the majority of TRACKS participants (81%); adults aged 18-59 are the next largest segment at 8.1%, followed by preschool children (7.2%) and seniors ages 60+ (3.7%)<sup>12</sup>. Adults aged 18-59 are 8.1% of participants as compared to 49.1% of SNAP eligibles<sup>9,12</sup>.

**Figure 2. Total Number of PA SNAP Eligibles by Gender & Age**



**Figure 3. FY2015 SNAP-Ed Participants by Age**



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- PA's population is aging and becoming more racially/ethnically diverse each year. It is ranked 6<sup>th</sup> in the nation for proportion of people 65 years and older. Population of minority groups has increased more quickly than overall population. Between 2010 and 2014, the Hispanic population grew by 16.6%<sup>13</sup>.
- Northeast PA has a more diverse population than is average for the rest of PA. In the Hazelton area there are limited English speaking skills. The area also has a higher percentage of elderly than the state and national average and the over 65 population is projected to rise from 19.4% to almost 22%<sup>6</sup>.
- Although the majority of PA SNAP eligibles are white (54.3%), there are also a large percentage of black SNAP eligibles (30.1%). The areas with the greatest percentage of black SNAP eligibles are in urban areas: Philadelphia County (61%), Delaware County (56%), Montgomery County (31%), Dauphin County (41%), and Allegheny County (44%)<sup>9</sup>.
- The majority of Adult/Senior Track SNAP-Ed direct education participants are non-Hispanic White (45.1%), followed by non-Hispanic Black/African American (34.7%) and Hispanic White (11.2%)<sup>12</sup>.
- The Preschool and School-Age Tracks serve a large, urban population; Non-Hispanic Black/African American preschoolers represent the largest portion (44.3%) of all Preschool Track participants, followed by non-Hispanic White (30.8%) participants and Hispanic White (14%). Non-Hispanic Black/African American represent the largest segment of (45.6%) of School-Age Track participants, followed by non-Hispanic White (26.8%) and Hispanic White (17.8%)<sup>12</sup>.
- Spanish-speaking SNAP eligibles in PA are growing in number. Spanish was reported as a preferred language by 30,858 of SNAP eligibles in November 2015<sup>9</sup>. In comparison, only 26,460 SNAP eligibles reported Spanish as a first language in August 2007, an increase of 5.6%<sup>9</sup>. There has been a 10% increase over the last year (27,963 in December 2014).
- County-specific data from November 2015 indicate that the Spanish-speaking SNAP eligible population is disproportionately high in specific counties and that the number of Spanish-speaking SNAP eligibles continues to grow within these counties. Nearly  $\frac{3}{4}$  of PA Spanish speaking SNAP eligibles are located within 5 counties, Philadelphia (38.5%), Berks (13.4%), Lehigh (9.6%), Luzerne (7%), and Lancaster (6.4%)<sup>9</sup>. These data suggest a continued need for nutrition education materials available in Spanish.
- The Community Eligibility Program (CEP) allows schools and districts in high poverty areas to provide meals free of charge to their students. Almost 20% of PA public school are designated CEP. Philadelphia County has the highest percentage of CEP schools (90%) followed by Erie County (35.7%) and Allegheny County (34.5%). Fifty percent of Pennsylvania's CEP schools are located in Philadelphia County<sup>14</sup>.

### 2. PA Diet-Related Health Statistics on Target Population

Dietary patterns of PA SNAP eligibles reveal inadequate intake when compared to USDA Food Guidance.

- National Healthy People 2020 objectives include increasing the amount and variety of fruits and vegetables to the diets of those 2 years old and older<sup>1</sup>. An FY 2015 behavior monitoring survey was administered to a sample of students in grades 8-12 participating in PA SNAP-Ed, only 23.4% reported vegetable intake 3 or more times per day in the past 7 days<sup>2</sup>. This finding emphasized vegetable intake as a nutrition education need. TRACKS FY 2015 evaluation of 1,327 fifth grade students showed that many students do not meet recommended intake levels for vegetables. Only 56.3% reported consuming vegetables 3 or more times "yesterday"; the percentage decreases to 50.1% when French fries are not counted as a vegetable<sup>2</sup>.

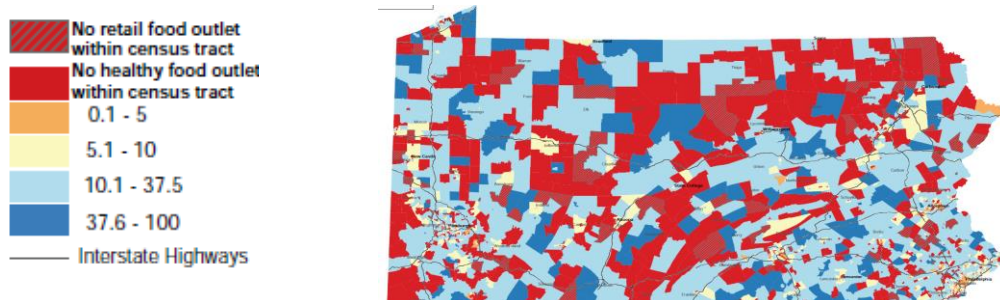
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- The Healthy People 2020 goal for fruit consumption is 0.9 cup equivalents per 1000 calories and 1.1 cup equivalents per 1000 calories for vegetable consumption<sup>1</sup>.
- A study of adult female residents in three public housing sites in Harrisburg, PA (n=91) found low fruit and vegetable intake, high fat intake, and low fiber intake using Gladys Block fruit/vegetable, fat, and fiber screener<sup>15</sup>.
- Results of a related study conducted in rural Lewistown, PA (n=58) found lower than recommended fruit, vegetable, and fiber intake. Almost a third (29.1%) of study participants were overweight and almost 42% were obese based on self-reported height and weight. This obesity rate was well above the national average of 32.9%<sup>16</sup>.
- CDC 2011 data shows 33.7% of PA children aged 12-17 do not eat family meals most days of the week compared to the national average of 30.7%<sup>17</sup>.
- Data from the 2015 Study on America's Consumption of Fruits and Vegetables show<sup>18</sup>
  - Fruit and vegetable consumption has decreased over the past 5 years.
  - Children (<12 years of age) are consuming more fruit than 5 years ago, however vegetable consumption has decreased.
  - Adults 18-44 years old are eating more fruit and the consumption of fresh fruits has increased.
  - Adults 45 and over are consuming less fruits and vegetables than 5 years ago.
  - Households with incomes less than \$20,000 per year have the largest decline in fruit and vegetable consumption over the last 5 years.
- Fruit and vegetable consumption data from the National Youth Risk Behavior Surveillance System (YRBSS), Behavioral Risk Factor Surveillance System (BRFSS) and TRACKS statewide student monitoring data show:
  - 36.1% of PA adults report consuming fruits less than one time a day. 23.9% report consuming vegetables less than one time a day<sup>19</sup>.
  - 15% of PA adults report eating five or more fruits or vegetables on a daily basis. Women (19%) have a significantly higher intake than men (11%). In households with incomes less than \$15,000, 12% of adults consume fruits or vegetables five or more times per day compared to 20% with incomes of \$75,000 or more<sup>20</sup>.
  - 14% of PA adults report eating three or more vegetables on a daily basis. Women (16%) have a significantly higher intake than men (11%). In households with incomes less than \$15,000, 9% of adults consume vegetables three or more times per day compared to 18% with incomes of \$75,000 or more<sup>20</sup>.
  - In the Northeast, 10% of Lackawanna County residents and 5% of Luzerne County residents do not eat fresh fruits/vegetables<sup>6</sup>.
  - In the Northwest (Erie County) only 10% of adults over 18 years of age reported eating fruits and vegetables (2011) 5 or more times per day which is significantly lower than 21% in 2007. The highest intake of five servings of fruits/vegetables was in the Hispanic adult population (14%), followed by college grads, households with income over \$50,000 and females<sup>7</sup>.
  - Statewide in 2015, 33.6% of TRACKS 8<sup>th</sup> – 12<sup>th</sup> graders reported eating fruits 2 or more times a day in the last seven days and 33.4% reported eating vegetables 2 or more times in the last week<sup>2</sup>.
  - Philadelphia-specific data reveal that in 2013, 25.9% of high school students reported eating fruits or drinking 100% juice 2 or more times a day in the last seven days and 20.1% reported eating vegetables 2 or more times per day in the last week<sup>21</sup>.
- Milk consumption data from the National Youth Risk Behavior Surveillance System (YRBSS) and TRACKS Statewide monitoring data show:

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- Nationally in 2013, only 12.5% of high school students reported drinking 3 or more glasses of milk per day in the past week which decreased from 16.2% in 2005<sup>22</sup>.
- Statewide in 2015, 29.4% of TRACKS 8<sup>th</sup> – 12<sup>th</sup> graders reported consuming 3 or more cup equivalents of dairy per day in the past seven days<sup>2</sup>.
- Thirty-nine percent of Erie County adults consumed 2 or more servings of dairy per day in 2011, down from 69% in 2007. Lowest percentages were for males, Hispanic, non-Hispanic Black adults and those over 65 years of age<sup>7</sup>.
- A sample of Adult/Senior Track participants completed a Calcium post/retrospective-pre survey in 2015. Prior to SNAP-Ed, 8.4% of respondents report consuming  $\geq 3$  cups of dairy products each day. After SNAP-Ed, the number increased to 20.4%<sup>2</sup>.
- In Erie County the intake of whole grains (one or more servings) by adults have decreased from 82% in 2007 to 64% in 2011. Six percent reported drinking sugar sweetened beverages 3 or more times a day<sup>7</sup>.
- The modified retail food environment index (mRFEI) measures the number of healthy and less healthy food retailers within census tracts across each state as defined by typical food offerings in specific types of retail stores (e.g., supermarkets, convenience stores, or fast food restaurants)<sup>23</sup>. See figure 4.

**Figure 4. PA Modified Retail Food Environment Index<sup>23</sup>**



(By U.S. Census Tract)

Lower scores indicate that census tracts contain many convenience stores and fast food restaurants compared to the number of healthy food retailers. A zero score indicates no healthy food retailers (supermarkets, larger groceries, produce stores, or supercenters) within the census tract.

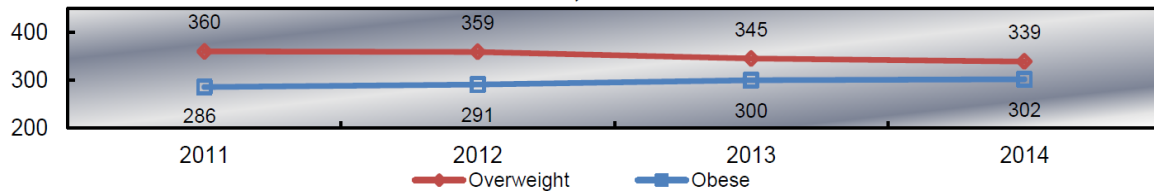
- 30.9% of PA census tracts do not have at least one healthy food retailer within ½ mile of tract boundary<sup>19</sup>.
- Reported barriers to healthy eating behaviors relevant to the urban setting were explored with a low-income (LI) audience in Harrisburg, PA. Barriers identified included distance to a grocery store, transportation issues, higher produce costs as compared to less expensive snack foods, and influence of children on food purchasing decisions<sup>15</sup>.
- Additional barriers to access healthier food options in PA include living in rural areas, economic challenges, food deserts, lack of transportation, expense of convenient corner stores, cost of healthy food, and lack of knowledge (what is healthy and preparation)<sup>24</sup>
- In Southeastern PA (SEPA), the Philadelphia area, 42.2% of all adults eat fast food at least once a week as compared to 48% of those living in poverty<sup>25</sup>.
- More than half of SEPA adults (53%) do not consume recommended amounts of fruits or vegetables each day. Some groups are overly represented in this data, such as 60% males, Black (67.6%) Latino (65%) White (46.9%) adults; and those living below poverty (71.5%) compared with those above (50.6%)<sup>25</sup>.
- 28.4% of SEPA adults travel out of their neighborhoods to purchase food<sup>25</sup>.



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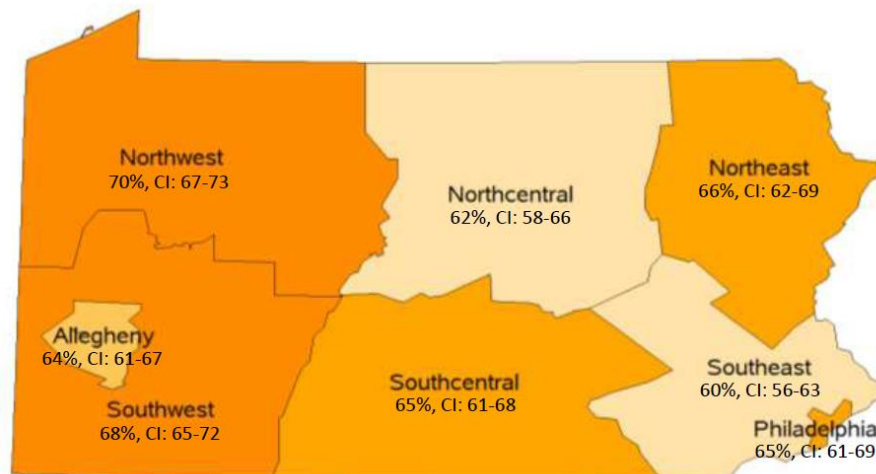
- 12.5% of SEPA adults have had to alter or skip a meal due to lack of money for food<sup>25</sup>.
- A 2009/2010 assessment of community/consumer nutrition environment was researched in two LI neighborhoods in Philadelphia, West Parkside and East Parkside. Since there are only 3 grocery stores and 16 convenience stores within close proximity, available, affordable healthy food options are difficult to obtain<sup>26</sup>.
- In NEPA there is limited access to healthy nutrition as residents don't always have access to a grocery store. 12.8% of Lackawanna residents have no access to fresh fruits and vegetables<sup>6</sup>
- McKean County in northwest PA is very rural with only 44.4 persons per square mile compared with PA overall of 284 persons per square mile. Only 50% of these residents have access to healthy food<sup>27</sup>. Also in the Northwest, the city of Erie has seven food deserts identified by census data and a total of 10 deserts in the county<sup>7</sup>.
- As shown in Figure 5, the percentage of overweight adults (18+) in PA is about 34% and 30% are considered obese<sup>28</sup> compared to 36.2% and 27.6% nationally<sup>20</sup>. Figure 6 illustrates that the northwest (70%) and southwest (68%) areas of PA have the highest percent of overweight/obese adults<sup>28</sup>.
- According to a 2014 report, PA is the 20<sup>th</sup> most obese state, 30.2% of adults in PA are obese (BMI>30). The rate for young adults (ages 18-25) is 17.2%, baby boomers (ages 45-64) is 33.6% and the rate of obesity for seniors (ages 65+) is 29.5%<sup>29</sup>. By 2030, the percentage could be 56.7% if the current trend continues<sup>29</sup>.

**Figure 5. Overweight and Obese Prevalence per 1000 PA Adults, 2011-2014**



PA Department of Health 2014 Behavioral Risks of PA Adults

**Figure 6. Overweight or (Overweight and Obese), PA Adults by Districts, 2013**

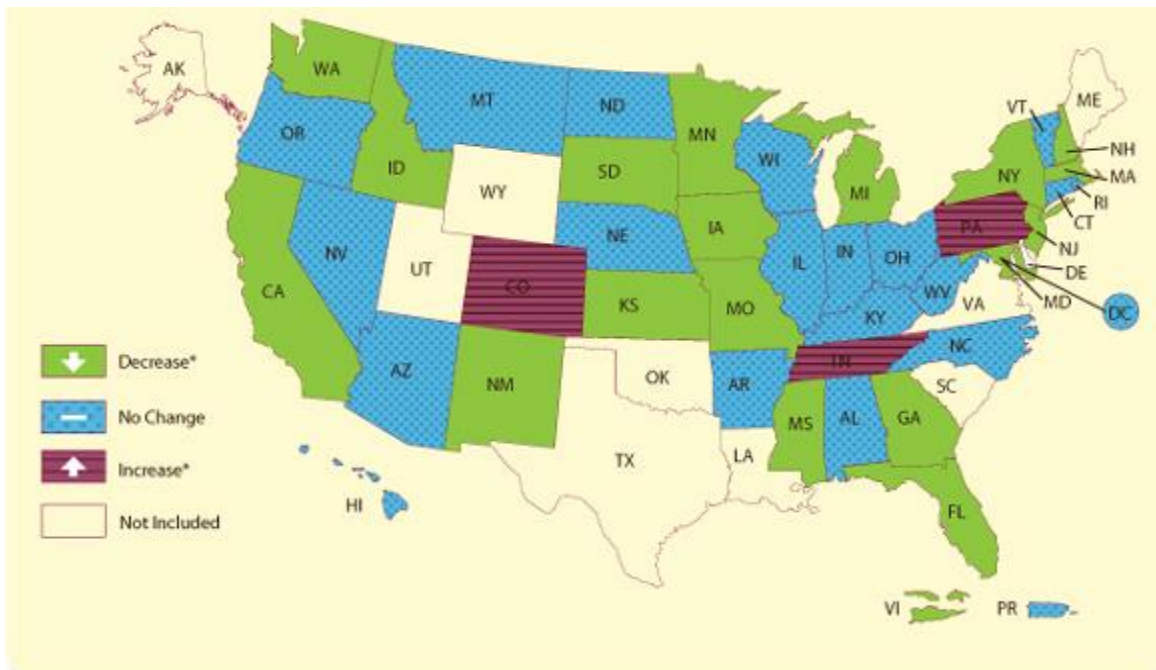


PA Department of Health 2014 Behavioral Risks of PA Adults

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- PA Department of Health statistics indicate males had a significantly higher percentage of overweight (39%) compared to females (29%). Non-Hispanic black adults had a significantly higher percentage of obesity (37%) compared to Non-Hispanic white adults (29%). Forty two percent of those with yearly incomes of less than \$15,000 were reported to be obese compared to 25% of those with incomes over \$75,000<sup>28</sup>.
- 31.9% of Philadelphia’s adults have a BMI greater than or equal to 30 kg/m2. Of the eleven largest US counties, Philadelphia is the county with the highest adult obesity level<sup>30</sup>. Allegheny County, which includes Pittsburgh, has an adult obesity level of 28.5%<sup>31</sup>.
- The percent of overweight/obese PA school children is 38.4% for grades K-6 and 40% for grades 7-12 up from 32.6% and 34.1% in just two years<sup>27</sup>. Potter and Monroe Counties have the largest percentage of overweight/obese students in grades K-6 at over 60%. Greater than 60% of 7-12 grade students in Potter and Union Counties are considered overweight/obese<sup>32</sup>.
- In the seven largest cities where data is available, Philadelphia ranks 1<sup>st</sup> for teen obesity<sup>30</sup>. 15.9% of children (grades K-6) in Allegheny County are considered obese and 15% of teens (grades 7-12) are obese<sup>31</sup>.
- Children (grades K-6) in Lebanon County have the highest obesity rate in the state at 17.4% and Perry County has the highest teen (grades 7-12) obesity rate at 22.8%<sup>34</sup>.
- Nationally, research has shown that low and high-income children have similar BMI in kindergarten. By 8<sup>th</sup> grade more low-income children were obese compared to high-income children. For example, 6% of 14 year old girls from high-income families were obese while 20% of children from low-income families were obese<sup>33</sup>.
- Nationwide, obesity rates of preschoolers (aged 2-5 years) have fallen for the first time in years from 14% in 2003-2004 to just over 8% in 2011-2012. While 19 states significantly decreased, PA is one of three states where preschool obesity levels increased<sup>35</sup>. See Figure 7.

**Figure 7. Changes in Obesity from 2008 through 2011 for Children ages 2-4.**



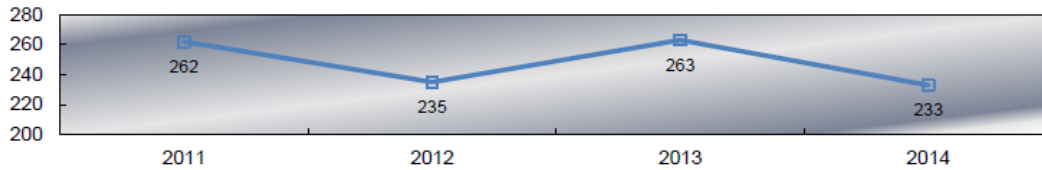
CDC Control and Prevention Vital Signs – Progress on Childhood Obesity: Many States Show Declines 2014



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- PA data show that 23% percent of adults engaged in no physical activity in the last month. (Figure 8) More adults in the Southeast portion of the state participate in physical activity<sup>28</sup>. (Figure 9)

**Figure 8. Participated in No Physical Activity in the Past Month Prevalence per 1000 PA Adults, 2011-2014**



PA Department of Health 2014 Behavioral Risks of PA Adults

**Figure 9. Participated in No Physical Activity in the Past Month, PA Adults by Districts, 2014**



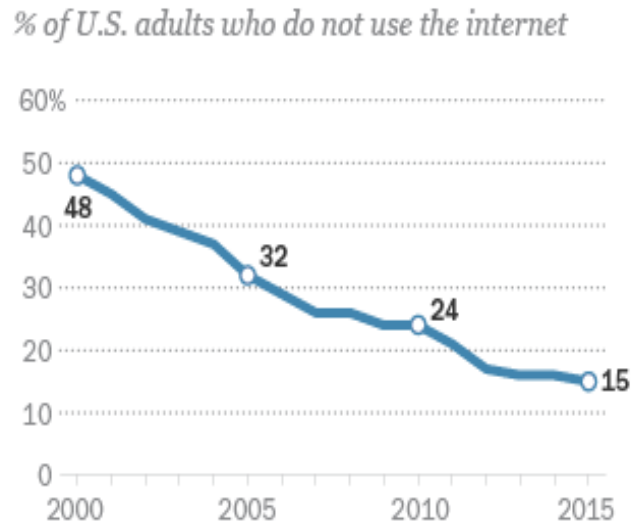
PA Department of Health 2014 Behavioral Risks of PA Adults

- Barriers to physical activity include lack of time, competing priorities, environmental barriers (safety, traffic, poor street features, limited access to fitness facilities and cost).<sup>24</sup>
- Thirty-seven percent of PA adults earning less than \$15,000/year had “no leisure time physical activity” when compared to those making over \$75,000 (11%)<sup>28</sup>. More Hispanic adults (34%) reported “no leisure time activity” as compared to white non-Hispanic adults (22%)<sup>28</sup>.
- Over 39% of southeast PA adults are physically active less than three times per week. 46.8% of adults living below poverty level exercise less than three times a week. At or above the poverty level, the number drops to about 38.2%<sup>25</sup>.
- Residents of Lackawanna (52.3%) and Luzerne (55.4%) Counties report lower rates of physical activity than those reported for the state and nation<sup>6</sup>.
- In south central PA, specifically Perry, Cumberland, Dauphin, Lebanon, and York Counties, between 2012 and 2015 there was an increase of 7.1% in reported physical activity – from 68.1% to 75.2%<sup>34</sup>.
- In Erie County the rate of no leisure time physical activity went up from 24% in 2007 to 28% in 2011<sup>7</sup>.
- National YRBSS data from 2013 show that 15.2% of students had not participated in recommended levels of physical activity (60 minutes daily during 5 or more days a week) on even 1 day during the week prior to the survey<sup>21</sup>.

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- FY 2015 TRACKS data showed that 46.9% of students (8<sup>th</sup>-12<sup>th</sup> grades) reported 60 minutes of physical activity on 5 or more days in the past 7 days after participating in SNAP-Ed<sup>2</sup>.
- As shown in Figure 10, the number of U.S. adults that don't use the internet has shrunk. In 2000, 86% of the population 65 years or older did not go online; in 2015 that rate has decreased to 39%<sup>36</sup>.

**Figure 10. Declining Offline Population**<sup>36</sup>



- Accessibility of web-based nutrition education is supported by cognitive interview findings from a TRACKS formative evaluation project that found 80% of LI persons interviewed had access to the internet at home or another location<sup>37</sup>. FY12 TRACKS data shows that 97.1% of respondents (grades 8-12) connect to the internet from home, 89.4% use a cell phone when connecting and 48.6% of those students conveyed they would use an app to increase their knowledge of nutrition and health<sup>2</sup>.
- A Philadelphia Coalition received an \$11.8 million stimulus grant to distribute over 5,000 computers to the low income audience along with hands-on training<sup>38</sup>.
- “Adult obesity rates remain far too high overall, and racial, ethnic, and socioeconomic disparities persist.” The following are recommendations from the Map the Meal Gap Project. “Because community based obesity-and disease-prevention programs can significantly cut healthcare costs for communities, funding for evidence-based programs at all levels of government will continue to be important.” “Food assistance programs should encourage and incentivize the purchase of healthy foods and evaluate strategies to determine which are most effective at improving consumption and health outcomes.”<sup>39</sup>
- In Erie County, cardiovascular disease was the leading cause of death from 2009-2011. Risk factors associated with heart disease include inactivity, obesity, high blood pressure, high cholesterol, and diabetes<sup>7</sup>.
- A new \$4.4 million grant was awarded to a PA team of scientists. They will research causes of obesity, associated health problems, and improved treatments<sup>40</sup>.
- In PA, 11% of the population is aware they suffer from diabetes (DM)<sup>28</sup>.
- The incidence of diabetes changes with age. In PA, about 23% of those over 65 years of age have been told they have diabetes as compared to 15% for those 45-64 years of age and 4% for those 30-44 years of age<sup>28</sup>.

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- Eighteen percent of the PA population with less than a high school education is diabetic vs 6% for people with a college degree <sup>28</sup>.
- Twenty percent of people in PA making less than \$15,000 are diabetic while only 6% of people making \$75,000 have been diagnosed <sup>28</sup>.
- Black, non-Hispanic PA residents have a higher incidence of DM, at 13%. The rate for White non-Hispanic is 11% <sup>28</sup>.
- Philadelphia specific information reveals 11% of adults have been diagnosed with diabetes. This has steadily increased and doubled since 1994. 20.8% of adults 60-74 have been diagnosed compared with 2.4% of adults 18-39 years of age. Non-Latino Black adults (16.3) have a higher incidence of DM as compared with Latinos (9.6%), Whites (9.5%), and Asians (8.9%). Seventeen percent of adults below the 100% federal poverty level have diabetes compared to 10% of non-poor adults <sup>25</sup>.
- The rate of diabetes for Erie County adults in 2011 was 11%, up from 8% in 2007<sup>7</sup>.
- Thirty-four percent of adult Pennsylvanians are aware they have hypertension (HTN) <sup>20</sup>.
- As with DM, the percentage of those affected by hypertension differ by age, education, income and race. For adults over 65 years of age, the percentage goes up to 64% <sup>20</sup>.
- 45% of PA residents with less than a high school education have been told they have hypertension while 25% of college educated individuals have hypertension<sup>20</sup>.
- 44% of people making less than \$15,000 are aware of a diagnosis of hypertension verses 26% of people making \$75,000 or over <sup>20</sup>.
- Black, non-Hispanic PA residents have a higher incidence of HTN <sup>20</sup>.
- Philadelphia specific data reveals 35.9% of adults have been diagnosed with HTN (32.7% men and 30.5% women). The rate of hypertension for Black adults is 40.5% compared to 30% for White and 24.3% for Latino adults. 41% living below 150% of the Federal Poverty Level have HTN compared with 29.3% living at or above that poverty level <sup>25</sup>.
- Philadelphia, Forest, and Fayette Counties were ranked lowest for health factors and the lowest ranking counties for health outcomes included Philadelphia, Fayette and Sullivan indicating a great need for nutrition-related interventions in these counties<sup>3</sup>.

### 3. Other Nutrition-Related Programs Serving LI Persons in PA

Numerous programs that deliver nutrition education to LI audiences operate within PA. These range from federally or state funded programs to those operated by local non-profit agencies or charitable organizations.

- The PA Department of Health administers the WIC program in all PA counties.
- The Expanded Food and Nutrition Education Program (EFNEP) conducts nutrition education programming to LI adults who have children and are responsible for planning and preparing family meals. EFNEP is not funded statewide; however, this program is available in 61 of the 67 PA counties.
- The PA Department of Education (PDE) coordinates Team Nutrition initiatives, providing school foodservice departments with materials and resources to improve meal preparation, increase understanding of the nutritional needs of children, and promote healthy school food environments by emphasizing the nutritional value of school meals. Additionally, PDE implements national school meal programs in PA.
- Head Start, a preschool program with a nutrition component, serves LI children throughout the state.

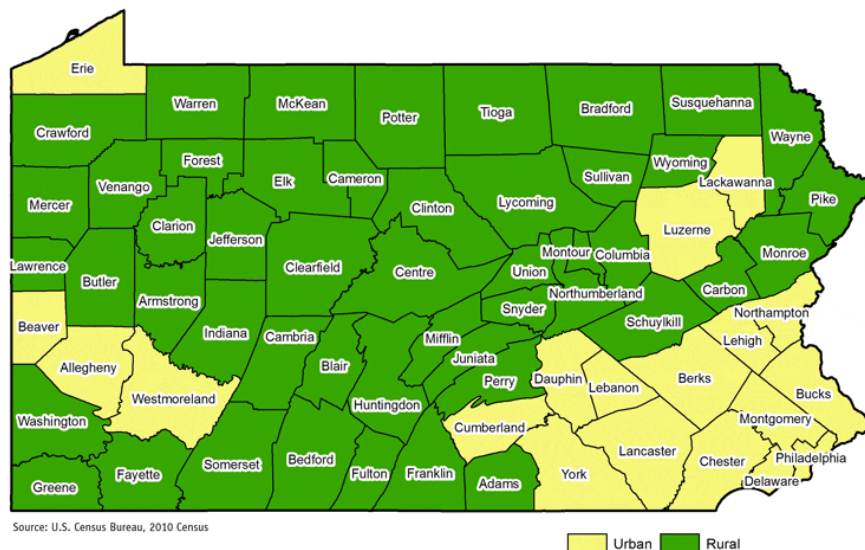
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- The PA Department of Aging administers congregate meals at senior centers and home-delivered meals to homebound persons.
- The Emergency Food Assistance Program (TEFAP) and the State Food Purchase Program are administered by the PA Department of Agriculture, providing regional food banks with commodities and fresh foods to supply local non-profit food pantries serving the LI population across the state.
- Food policy councils active within the state include Pittsburgh Food Policy Council, Philadelphia Food Policy Advisory Council, and PA Governors Food Security Partnership.

### 4. Underserved Audiences and Geographic Areas of PA

- **Adults** are an underserved population. 41.3% of PA SNAP recipients are adults aged 18-59<sup>9</sup>, but adults account for only 8.1% of PA SNAP-Ed participants<sup>12</sup>.
- **Preschool-age children** continue to be underrepresented in the SNAP-Ed population. Preschoolers account for only 7.2% of SNAP-Ed participants<sup>12</sup>. Some progress has been made in increasing reach to preschoolers. Between FY 2010 and FY 2015 TRACKS preschool participation increased from 7,625 to 20,140, a 264% increase in just five years. There was an increase in preschool participation by 160% just between FY 2014 (12,617) and FY 2015. These data indicate that efforts to reach this audience are working; however, rural preschoolers remain underserved. 78.2% of PA SNAP-Ed preschool participants are located in a major urban area. The majority of programming, (81.8%), is provided by one local partner programming in Philadelphia and Montgomery Counties<sup>12</sup>.
- **Rural PA counties** are historically underserved by SNAP-Ed. The following PA counties received only indirect SNAP-Ed in FY 2016: Cambria\*, Cameron\*, Carbon, Chester, Clarion, Clinton, Columbia, Crawford\*, Cumberland, Forest, Franklin, Greene\*, Juniata, Lebanon, McKean\*, Mifflin\*, Monroe, Montour, Northumberland\*, Perry, Potter\*, Snyder, Somerset, Tioga, Union, Venango\*, Warren, Washington, and Wayne. The asterisk indicates counties with greater than the State percentage (14.7%) of SNAP eligible population (American Fact Finder 2010-2014 ACS Estimates, PA DHS SNAP Eligibles by County November 2016).

### Rural Pennsylvania Counties



[http://www.rural.palegislature.us/demographics\\_rural\\_urban\\_counties.html](http://www.rural.palegislature.us/demographics_rural_urban_counties.html)

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### 5. Implications of Needs Assessment

- Implement evidence-based nutrition education and policy, system, and environmental approaches to improve nutrition and physical activity behaviors. Expand evidence-based SNAP-Ed with priority community partners (e.g. grocery and corner stores, farmers' markets).
- Expand reach of evidence-based SNAP-Ed to underserved adult audiences.
- Expand reach of evidence-based SNAP-Ed to underserved rural preschool audience.
- Expand reach of evidence-based SNAP-Ed to underserved, high-need areas.
- Given the increased availability of internet access and technology, education materials and methods using technology will be continued.
- Assess PA SNAP-Ed effectiveness using appropriate measures and indicators.
- Develop partnerships with agencies providing related public health services to support coordination of efforts. Table below lists examples of PA SNAP-Ed partnership opportunities related to Blueprint for a Hunger-Free PA goals.

Blueprint for a Hunger-free PA Goals	PA SNAP-Ed Opportunities
Every county and/or region in Pennsylvania will have a local food alliance to combat hunger in their local communities.	Representation in local food alliance groups.
The SNAP participation rate will increase from 90 percent to 98 percent or higher.	Communicate with relevant SNAP outreach partners.
The number of children benefiting from free and reduced price meals during the school year (linked to nutrition programs in summer) will increase from 20 percent to 30 percent.	Partnering with SNAP-Ed eligible schools (CEP designated schools and schools with >50% free/reduced) and summer meal programs to provide evidence based nutrition education and school food environment interventions.
Sixty percent of students benefiting from free and reduced priced school meals will participate in school breakfast. This is an increase from 47 percent in 2014-15.	Partnering with SNAP-Ed eligible schools to provide evidence based nutrition education and breakfast policy interventions.
The Women, Infants, and Children (WIC) Farmers' Market Nutrition Program redemption rate will increase from 308,000 to 340,000 checks annually.	Marketing SNAP-Ed farmers' market nutrition education to WIC audiences.
Double SNAP Bucks will be available at all highly accessible, high-need farmers' markets, and additional SNAP recipients will have access to SNAP employment and training and SNAP education.	Farmers' market nutrition education and PSE interventions, such as food demonstrations, tastings, and recipes.
Pennsylvanians will have streamlined access to food security information and benefits.	Streamlined access to SNAP benefits for seniors; partnering with Area Agency on Aging to expand SNAP-Ed at senior centers.
Pennsylvania will improve access to healthy, nutritious food.	Partnering with corner stores to provide evidence based nutrition education and PSE interventions.

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