WHAT IS SNAP-Ed?

SNAP-Ed is the nutritional education component of the Supplemental Nutrition Assistance Program (SNAP). Through evidence-based, collaborative approaches, SNAP-Ed programs improve the likelihood that low-income families and youth will make healthy food choices and choose active lifestyles consistent with the current Dietary Guidelines for Americans and MyPlate.gov.
ABOUT SNAP-Ed

The Problem: Food Insecurity and Obesity are Widespread and Costly

Food Insecurity is common:
Roughly 1 out of 5 American households with children, and 1 in 4 Georgia children experienced food insecurity; meaning a lack of adequate food due to insufficient money or other resources.¹

Food Insecurity is costly:
Beyond the immediate concerns of hunger; insufficient access to food jeopardizes children’s long-run health, educational performance and life chances.

Obesity is common:
More than 1 in 3 American adults (over 72 million) are obese,² while 2 out of 3 adults and 1 out of 3 of children are overweight or obese in Georgia.³

Obesity is costly:
The annual medical cost of obesity is $147 billion.⁴

The Solution: Health Education Alongside Food Assistance

Each month, SNAP helps about 46 million low-income Americans put food on the table. Two-thirds of SNAP benefits go to households with children. SNAP plays an important role in reducing both poverty and food insecurity in the United States, especially among children. SNAP benefits lifted at least 4.7 million people out of poverty in 2014, including 2.1 million children.⁵

While SNAP addresses food insecurity, SNAP-Ed, the educational component, improves the likelihood that persons eligible for SNAP will make healthy food choices within a limited budget, and choose physically active lifestyles consistent with the current Dietary Guidelines for Americans and the USDA food guidance.

State-Level Goals

1 The SNAP-Ed eligible population will have increased access to SNAP-Ed in Georgia.

In 2015, HealthMPowers worked with 86 elementary schools and early childcare centers in 20 school districts across Georgia, reaching over 45,209 students and their families along with over 2,202 staff.

In 2016, HealthMPowers is also expanding to reach communities, families and middle schools in low-income areas with nutrition and physical activity education and resources to support those receiving SNAP benefits, and build healthier communities throughout the state of Georgia.

2 SNAP-Ed participants will demonstrate increased knowledge and improved behaviors related to nutrition and physical activity.

87% of HealthMPowers participants improved health knowledge and behaviors, leading 69% to show improvements in physical fitness.

3 Low-income Georgians will have increased access to healthy foods and nutrition/physical activity education due to SNAP-Ed public health and community approaches.

In the 2014-15 school year, participating teachers provided 45,753 hours of school-delivered nutrition and physical activity instruction using HealthMPowers’ resources.

Ongoing Support is Critical

Each year, SNAP lifts millions of families out of poverty and hunger. A growing body of research shows that improving food security through SNAP leads to positive outcomes in the short-run and long-run. These positive impacts are especially pronounced for children, whose families receive a large majority of SNAP benefits. Moreover, SNAP’s beneficial impacts on children’s health and educational outcomes not only improve children’s present well-being, but also are likely to result in better life outcomes and increased self-sufficiency in the future.

At the same time, a variety of compelling evidence suggests that too many American families continue to struggle with food insecurity. A number of studies have shown that the current level of benefits often cannot sustain families through the end of the month, and new research has linked the gap in food access to high-cost consequences—including increased hospitalizations among adults with diabetes and disruptions in learning among school-aged children.
Empowering Healthy Choices in Schools, Homes & Communities in Georgia Program

HealthMPowers works with multiple stakeholders to promote nutrition education and physical activity through SNAP-Ed funding. Education, accompanied by environmental supports, is provided to schools and child care centers to facilitate the adoption of healthy eating and physical activity behaviors by students, staff and families. Training, resources and information are provided and reinforced to sustain positive change.

About HealthMPowers

HealthMPowers was developed using the evidence-based guidelines established by the Centers of Disease Control and Prevention (CDC) to promote healthy eating and physical activity in schools.

What are the Goals of the Program?

A) Increase nutrition education and physical activity opportunities in school
B) Improve student knowledge about healthy eating and physical activity
C) Improve student nutrition and physical activity behaviors
D) Increase family participation
E) Improve school nutrition and physical activity programs, policies, systems and environments

How Does the Program Work?

HealthMPowers uses a continuous improvement model for the SNAP-Ed “Empowering Healthy Choices in Schools, Homes and Communities” program.

The program provides schools and child care centers with training, classroom and family-based resources and services, and program assessment/evaluation to create and sustain positive change for students, staff and families as it relates to nutrition and physical activity.
The HealthMPowers program ensured that all schools had a functioning school health team, comprised of 3 – 5 individuals. These individuals assisted with program implementation in their schools. Three trainings, totaling 188 hours were held across the year. During trainings, school teams completed the nutrition and physical activity needs assessment (School Health Index); developed an action plan targeting program, policy, systems and environmental changes in nutrition or physical activity; and created a calendar of events for HealthMPowers’ services and resource implementation. All schools received the following during FY15:

**Local School Team Trainings**
3 trainings per school to support program implementation

**Monthly Grade-Level-Specific Program Implementation Plan**
recommended plan for use of materials each month

**Monthly Electronic Newsletters**
for classroom teachers with ideas for integrating nutrition and physical activity education into the core curriculum

**Resource Tracking Posters**
for tracking resource usage/time and effort

**Grade-Level Meetings**
trainings for teachers at each grade on how to integrate the resources provided into the school day

**On-going Technical Support**
technical support provided by trained HealthMPowers educators

**Local School End of Year Report**
providing personalized school data from the previous school year

**Resources**
curriculum and teaching aids to easily integrate additional nutrition education and physical activity in the classroom

48% of students reported improved self-efficacy
79% of students improved their health-knowledge
87% of students reported improved behaviors

87% of students reported improved behaviors
ELEMENTARY RESULTS

Elementary School Highlights

- 100% of elementary schools completed a nutrition and physical activity needs assessment (School Health Index).
- Students improved heart health, measured by the PACER aerobic fitness test:

  4th grade males, 4th grade females, 5th grade males, and 5th grade females – had significant increases of approximately 3 to 4 laps in number of PACER laps completed at post-test.

The increased opportunities for nutrition education and physical activity provided by HealthMPowers led to healthier school environments, which led to improved student health behaviors and outcomes.

The most notable outcomes included significant improvements in student Body Mass Index (BMI) and aerobic capacity. Data analysis conducted by Georgia State University showed:

Service Delivery: 2,762 hours of HealthMPowers’ staff-delivered services

Improved School Environment: 45,753 hours of school-delivered nutrition & physical activity instruction using HealthMPowers resources

Improved BMI: 78% maintained or improved BMI percentile

Improved Health Outcomes: 69% improved aerobic capacity
Recent research shows that the first five years of life are an important time for intervening to prevent childhood obesity and establishing healthy habits. Children who enter kindergarten overweight or obese are four times more likely to be overweight or obese in middle school.\textsuperscript{6}

In 2014-2015, HealthMPowers ventured into early childhood care with a pilot to adapt our successful elementary model for child care settings.

The pilot met and exceeded the proposed goals: 50% of child care sites establishing a health team; completing a nutrition and physical activity assessment; and creating a plan for improvement, with 100% of child care centers meeting all of the proposed goals within the year.

Students at Wee Care Early Learning Center try spinach as a part of HealthMPowers’ Taste Testing Lesson

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SUPPORT SNAP-Ed FUNDING

HealthMPowers needs your support to continue this important work with children and families. Investments in our children’s health future today will result in lower healthcare costs and greater security for the state’s fiscal future. Find out more about HealthMPowers at www.healthmpowers.org, and learn about SNAP-Ed’s efforts in other states at snap.nal.usda.gov/.

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