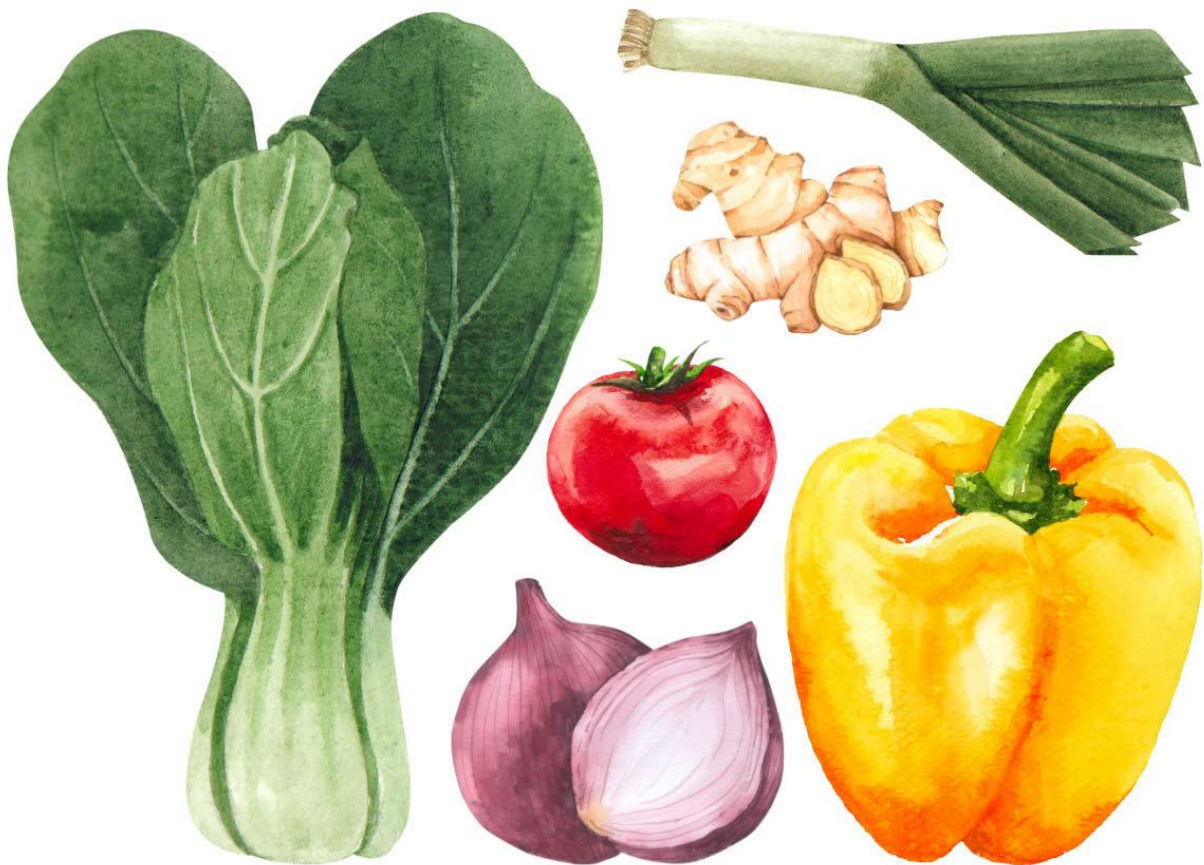


2024

EVALUATION REPORT

CALFRESH HEALTHY LIVING PROGRAM



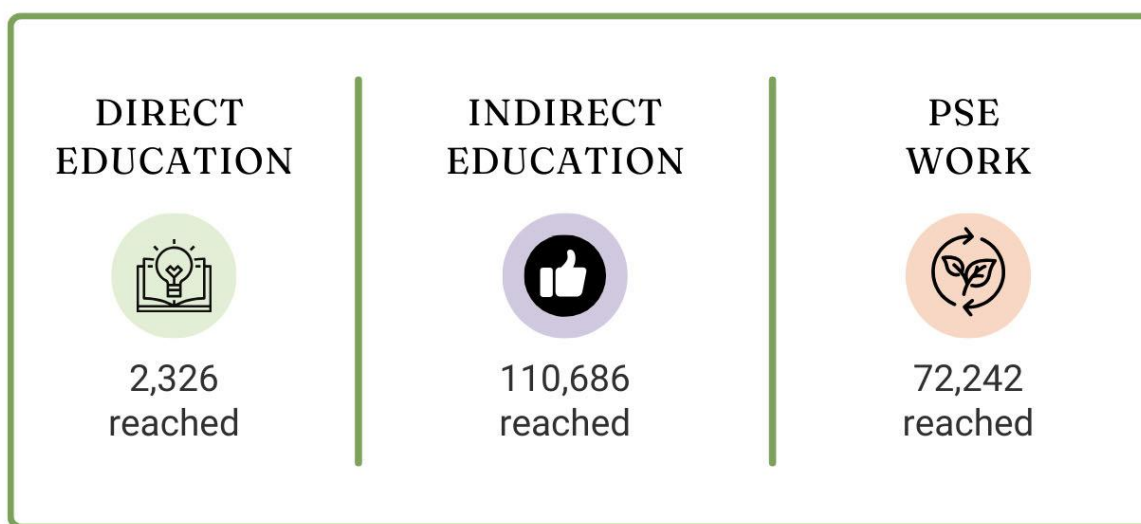
CATHOLIC CHARITIES OF CALIFORNIA



CATHOLIC CHARITIES DIOCESE OF STOCKTON



CFHL Evaluation Report



Throughout FFY 24, CC Stockton (CCST) offered a variety of engaging nutrition education series using three curricula. Food Smarts for Adults has five one-hour sessions, and the Eat Healthy Be Active curriculum provides six one-hour sessions. Lesson topics included “Enjoy Healthy Food that Tastes Great”, “Eating Healthy on a Budget”, and “Activity is Key to Living Well”.

In FFY 24, CCST also delivered its popular *Cooking Matters* series. The series offers six sessions with five lessons, including nutrition education, food preparation, and recipe tasting. To keep participants engaged, staff continues to incorporate best practices such as using culturally relevant foods, providing materials in multiple languages, and using vibrant visuals through participatory and hands-on learning.

CCST delivered single sessions at schools and food assistance partner sites using the *Food Smarts for Adults* curriculum. In addition, the agency used the *Be Healthy, Be Active Community Workshops* curriculum to deliver single-session classes at colleges, community centers, and grade schools.

CCST incorporated indirect education to enhance its direct education and PSE efforts. Healthy recipes were posted on parishes’ websites, and recipe cards were added to food bags at food distributions. CCST’s indirect education activities reached 110,686 individuals in San Joaquin and Stanislaus Counties.

Evaluation Results – Adult Series Intervention

CC Stockton collected 81 adult surveys using the *Food Behavior Checklist*. Surveys were collected in the San Joaquin County cities of Stockton and Tracy and the Stanislaus County cities of Modesto and Riverbank. Seventy-nine percent of the participants completed the Spanish version of the FBC.

As seen in *Table 44*, across the 16 MT1 healthy eating and drinking survey questions, 15 showed statistically significant ($p < .05$) changes. There was an increase in eating fruits and vegetables, grains, lean meats such as fish and chicken, and drinking water. Indeed, participants indicated they were eating nearly two-thirds of a cup of fruit and about one-half of a cup of vegetables more than before the nutrition education class. There was also a significant decrease in the consumption of sugary beverages and an increase in milk consumption with cereal. However, there was no significant decrease in drinking sugary sports drinks.

Among the five MT2 food resource management/smart shopping questions, four showed statistically significant changes but there was no significant decrease in running out of food before the end of the month. Indeed, 61% of respondents ran out of food sometimes, often, or always at pre-test and 64% at post-test.

All three of the MT3 PA questions showed statistically significant increases. There was a nearly 1-day increase in the number of days of exercising for at least 30 minutes and three-fourths of half-day in doing muscle strengthening exercises.

The Indicators of Success on the next page summarizes data points that highlight the statistically significant changes and other behaviors that did not show statistically significant change but whose responses indicated encouraging pre-post percentage changes that may be a prelude to significant change for the CC Stockton CFHL adult participants. The data points are consistent with medium-term MT1, MT2, and MT3 indicator outcome measures identified in the 2016 USDA SNAP-Ed Evaluation Framework.

TABLE 44 OUTCOME DATA ANALYSIS FOR CC STOCKTON (N = 81)

Survey Question Topic	p-Value	Type of statistically significant change
MT1 Healthy Eating		
1. Eat F&Vs as snacks	<.001	Increase
2. Drink sports drinks	.300	None
3. Citrus fruit or juice	<.024	Increase
4. Drink regular soda	<.001	Decrease
5. Milk with cereal	<.011	Increase
6. Cups of fruit	<.001	Increase
7. Cups of vegetables	<.001	Increase
8. Different fruit	<.001	Increase
9. Different vegetables	<.001	Increase
10. Drink Milk	.003	Increase
11. Take skin off chicken	<.001	Increase
12. Eat Fish	<.005	Increase
13. Eat >2 vegetables	<.001	Increase
14. Eat whole grains	<.001	Increase
15. Drink low/fat-free milk	<.003	Increase
16. Cups of water	<.001	Increase
MT2 Food Resource Management		
1. Use Nutrition label	<.001	Increase
2. Run out of food	0.582	None
3. List before shopping	<.001	Increase
4. Buy low-sodium food	<.001	Increase
5. Buy low-sugar food	<.001	Increase
MT3 Physical Activity		
1. >30 min exercise	<.001	Increase
2. Strengthen muscles	<.001	Increase
3. Make small changes	<.001	Increase

Indicators of Success

Catholic Charities Diocese of Stockton

81 FBC SURVEYS COLLECTED

ETHNICITY



85% Hispanic/Latine
7% Non-Hispanic/Latine
8% Preferred no response

LANGUAGE



21% Spanish
79% English

AGE



79% 18 - 59
21% 60 - 75

GENDER



91% Female
9% Male

RACE (CAN HAVE MULTIPLE SELECTIONS)



67% White
33% Preferred no response

KEY INDIVIDUAL IMPACTS

*STATISTICALLY SIGNIFICANT RESULTS

Fruits & Vegetables 1-week recall



91% ate at 1+ cup of veggies each day*



86% ate 1+ cup of fruit each day*



72% eat fruit and veggies as snacks often or every day*

Drink Choices 1-week recall



85% drink 4+ cups of water each day*



88% do not or only sometimes drink sodas*



84% do not or only sometimes drink sports drinks or punch

Smart Shopping 1-week recall



58% use nutrition facts label while shopping*



56% make a list of ingredients before grocery shopping*



58% buy foods with lower sugar or no sugar added, always or often*

Physical Activity 1-week recall



79% exercise 30+ minutes, 3+ days per week*



67% do muscle strengthening exercises 2+ days per week*



49% make small changes to be active often or always*

Evaluation Results – Adult Intervention with Cooking Matters Curriculum

CC Stockton collected 49 matched pre and post-test *Cooking Matters* surveys from adult participants via pen-to-paper. The following tables show the results for questions that are consistent with the SNAP-Ed Evaluation Framework's MT1 Healthy Eating and MT2 Food Resource Management outcome indicators. There are no MT3 Physical Activity questions in the survey. There is also a table that shows pre and post-levels of self-confidence in buying healthy ingredients and cooking healthy meals for the family.

Questions Related to MT1 Healthy Eating Behaviors

As shown in *Table 45* the analysis of 16 questions related MT1 Healthy Eating Behaviors revealed eight questions that showed a statistically significant change from pre to post-test. There was a statistically significant increase in six healthy eating and drinking behaviors: an increased consumption of fruits, green salad, and other non-fried vegetables. There was also an increase in the consumption of 100% fruit juice and in eating and drinking low-fat dairy products. Finally, two healthy eating questions showed significant increases in eating a timely breakfast and in eating from the five food groups each day. An encouraging behavior that did not show a statistically significant change was that 69% of respondents were drinking sugar-sweetened beverages such as soda once a week or less or not at all.

TABLE 45 MT1 HEALTHY EATING BEHAVIORS (N = 49)

Survey Questions (n = 49)	p-Value	Type of statistically significant change
1. Eat fruit like apples, bananas, melons, or other fruit	.046	Increase
2. Eat Green salad	<.001	Increase
3. Eat French fries or other fried potatoes like home fries, hash browns, or tater tots	.261	None
4. Other kinds of non-fried potatoes	.404	None
5. Eat Refried, baked, pinto, black, or other cooked beans	.308	None
6. Eat Non-fried vegetables like carrots, broccoli, and green beans	.045	Increase
7. Times a week typically eat a meal from a fast food restaurant?	.700	None
8. 100% fruit juice like orange, apple, or grape juice	.002	Increase
9. A can, bottle, or glass of regular soda, sports drink, or energy drink	1.000	None
10. A bottle or glass of water	.122	None
11. When you have milk, how often do you choose low-fat (skim or 1%)	.004	Increase
12. How often do you choose to eat low-fat or fat-free dairy products	<.001	Increase
13. How often do you choose to eat whole-grain products like bread, pasta, and rice	.159	None
14. When you eat at fast food or sit-down restaurants, how often do you choose healthy foods	.079	None
15. How often do you eat breakfast within two hours of waking up?	<.001	Increase
16. How often do you eat food from each food group every day?	<.001	Increase

Scales: Ques: 1-10. 1=Not all, 2= Once a week or less, 3= More than once a week, 4= Once a day, 5= More than once a day; Ques: 11-16. 1=Never, 2=Rarely, 3= Some-times, 4= Often, 5= Always, 6= Does not Apply.

Questions Related to MT2 Food Resource Management Behaviors

As seen in *Table 46*, the 10 MT2 resource management questions have been divided across Healthy Shopping, Smart Shopping, and Healthy Cooking Behaviors. Participants showed a statistically significant increase in the healthy shopping

behaviors of buying low-sodium food and lean meats. They also all showed statistically significant increases in smart shopping behaviors such as comparing prices, planning meals, using a grocery list, and reading the nutrition facts labels when shopping. Finally, they showed significant increases in preparing meals from scratch using healthy budget-friendly ingredients, making budget-friendly meals, and adjusting meals to include healthier ingredients.

TABLE 46 MT2 FOOD RESOURCE MANAGEMENT BEHAVIORS (N = 49)

Survey Questions (n = 49)	p-Value	Type of statistical significance change
Healthy Shopping Behaviors		
1. How often do you choose low-sodium options when you buy packaged foods	<.001	Increase
2. When you buy meat or protein, how often do you choose lean or low-fat, 90% or above lean ground beef, or beans	.001	Increase
Smart Shopping Behaviors		
1. How often do you compare prices before you buy food?	.004	Increase
2. How often do you plan meals ahead of time?	<.001	Increase
3. How often do you use a grocery list when you go grocery shopping?	<.001	Increase
4. How often do you worry that your food might run out?	1.000	None
5. How often do you use the “nutrition facts” on food labels?	<.001	Increase
Healthy Cooking Behaviors		
1. How often do you make homemade meals “from scratch” using mainly basic whole ingredients like vegetables, raw meats, rice, etc.?	.030	Increase
2. How often do you adjust meals to include specific ingredients that are more “budget-friendly,” like those on sale or in your refrigerator or pantry?	.003	Increase
3. How often do you adjust meals to be more healthy, like adding vegetables to a recipe, using whole-grain ingredients, or baking instead of frying?	<.001	Increase

Scale. Ques: 17-19: 1=Strongly Disagree, 2=Disagree, 3= Neither Agree nor Disagree, 4= Agree, 5= Strongly Agree. Ques: 20-29: 1=Never, 2=Rarely, 3= Some-times, 4= Often, 5= Always, 6= Does not Apply.

Questions 17 – 19 and 30 – 35: Attitudes Towards Cooking and Healthy Foods Self-Confidence

As shown in *Table 47*, although there was no statistically significant change in participants' feeling that cooking is frustrating from pre to post-test, there was a statistically significant decrease in participants' feeling that cooking takes too much time and a decrease in feeling it was too much work. This may be due to the courses' inclusion of not only recipe food demonstrations by the educators but also the built-in opportunities for the participants to prepare the course recipes in class.

TABLE 47 ATTITUDES TOWARDS COOKING, SHOPPING, AND HEALTHY EATING BEHAVIORS (N = 49)

Survey Questions (n = 49)	p-Value	Type of statistical significance change
1. Cooking takes too much time	<.001	Decrease
2. Cooking is frustrating	.506	None
3. It is too much work to cook	.004	Decrease

Scale: 1=Strongly Disagree, 2=Disagree, 3= Neither Agree nor Disagree, 4= Agree, 5= Strongly Agree.

As noted in *Table 48*, participants' confidence levels showed statistically significant increases in all six healthy food-related questions. Participants reported an increase in self-confidence related to their cooking skills, including using the same healthy ingredients in more than one meal, using basic cooking skills such as chopping fresh produce, measuring ingredients, following a recipe, and cooking healthy foods for their family on a budget. Indeed, at the post-test, 73% of the participants indicated that they prepared at least one of the course recipes at home for their family. Participants also reported a significant increase in their shopping self-confidence, indicating they can choose the best-priced fruits and vegetables when they shop and that they can buy healthy foods on a budget and still help their family eat healthier.

TABLE 48 SELF CONFIDENCE RATING RELATED TO HEALTHY FOODS (N = 49)

Survey Questions (n = 49)	p-Value	Type of statistical significance change
1. How confident are you that you can use the same healthy ingredient in more than one meal?	<.001	Increase
2. How confident are you that you can choose the best-priced form of fruits and vegetables (fresh, frozen, or canned)?	.040	Increase
3. How confident are you that you can use basic cooking skills, like cutting fruits and vegetables, measuring out ingredients, or following a recipe?	.018	Increase
4. How confident are you that you can buy healthy foods for your family on a budget?	<.001	Increase
5. How confident are you that you can cook healthy foods for your family on a budget?	<.001	Increase
6. How confident are you that you can help your family eat more healthy	<.001	Increase

Scales: Ques 30-35: 1=Not at all confident, 2= Not very confident, 3= Neutral, 4=Somewhat confident, 5= Very confident, 6= Does not Apply.

INDICATORS OF SUCCESS

Catholic Charities of California

49 COOKING MATTERS SURVEYS COLLECTED

ETHNICITY



59% Hispanic/Latine
41% Non-Hispanic/Latine

LANGUAGE



43% English
57% Spanish

AGE



37% 18 - 59
63% 60 - 75

GENDER



90% Female
10% Male

RACE

(CAN HAVE MULTIPLE SELECTIONS)



32% Asian
6% Pacific Islander
45% White
17% Preferred no response

KEY INDIVIDUAL IMPACTS

*STATISTICALLY SIGNIFICANT RESULTS

Healthy Eating Behaviors scaled responses



Increase in eating fruit*



Increase in eating green salad*



Increase in eating non-fried vegetables*



Increase in eating from each food group, daily*



Increase in choosing low-sodium options*

Food Resource Management scaled responses



Increase in choosing lean or low-fat proteins*



Increase in comparing prices before purchase*



Increase in using a grocery list when shopping*



Increase in using the nutrition facts label when shopping*



Increase in making homemade meals from "scratch"*

Confidence in Healthy Cooking scaled response



Decrease belief that cooking takes too much time*



Decrease belief that cooking is too much work*



Increase confidence in buying healthy foods on a budget*



Increase confidence in cooking healthy foods on a budget*



Increase confidence in using the same healthy ingredient in >1 meal*

Evaluation Results – Adult Intervention Single Sessions

A total of 306 *Intent to Change* (ITC) surveys were collected in FFY 24 by CC Stockton. All of the surveys were gathered in a classroom setting via pen-to-paper. Twenty-nine percent of the surveys were collected with the Spanish version of the ITCs and 71% were in English.

As shown in *Table 49*, the percentage of those not practicing healthy behaviors ranged from 25% who did not eat fruit at least 2 times a day to 58% not eating from the five food groups each day. Eating from the five food groups (89%) and eating more fruit (80%) all had high levels of intent to change. However, only half (53%) indicated they would eat a breakfast that includes at least 3 food groups next time.

TABLE 49 INTENT-TO-CHANGE BEHAVIOR RELATED TO INCREASE THE CONSUMPTION OF HEALTHY FOODS AND BEVERAGES

During the past week, did you...	Total (n)	% not practicing healthy behavior	# not practicing healthy behavior	% and # not practicing the healthy behavior who intend to “More Often” within the next week
Eat foods from all 5 food groups each day?	201	58%	117	89% (104)
Eat fruit at least 2 times a day?	20	25%	5	80% (4)
Eat a breakfast that includes at least 3 food groups?	85	38%	32	53% (17)
Combined: During the past week did you eat healthy foods?	306	50%	154	81% (125)

Summary

Overall, across the 154 respondents who were not practicing the three healthy eating behaviors in the past week, four out of five (81%) intend to do those behaviors more often in the coming week.

Policy, Systems, and Environmental Changes

Access to Healthy Food: Healthy Procurement

CCST implemented nutrition standards for procuring healthy foods through its food bank in 2017. It also launched the Healthy Food Bag Program to provide clients with pre-bagged, nutritious options low in fat, sodium, and sugar. Following the relocation of their offices in FFY 24, which limited food bank



capacity, CCST adopted a new healthy food distribution model, partnering with community organizations to deliver fresh produce and canned goods to residents in need of emergency food. This model included revising the Healthy Food Bag to serve low-income seniors and individuals with disabilities who lacked transportation to access the food bank.

In FFY 24, CCST collaborated with 11 food pantries to serve the community needing emergency food. Partner sites included churches and community centers that addressed food insecurity through healthy food distributions. The partners distributed canned goods, meat, bread, shelf-stable products, and fresh produce. Some also incorporated CCST's Healthy Food Bag model

when they distribute food. At most distributions, individuals could access the pantries weekly or biweekly. The 11 community partners served over 20,000 individuals in FFY 24. In addition, the CCST food bank served 7,641 individuals in FFY 24 through its monthly food distribution, furthering the agency's mission to improve community health through better food access.

Collaborations with organizations like Leah's Pantry's *Nutrition Pantry Program* ensured a continued focus on improving client-centered services, offering training and resources for food pantries, and recognizing improvements through certification.

Community Gardens

Due to limitations at the new CCST office site, establishing an in-ground edible garden was not feasible, prompting a shift to using garden planters. CCST secured large pots, soil, and mulch, successfully growing various produce, including parsley, mint, kale, jalapeños, cherry tomatoes, and banana peppers. In July 2024, they showcased jalapeños in a food demonstration at the Garden Acres Community Center, with excess produce from the food bank's garden. CCST plans to incorporate this produce into future workshops, teaching participants how to grow ingredients for healthy recipes at home.

In FFY 24, CCST partnered with Taft Community Center to introduce garden-based education to youth in their after-school program. Students learned basic gardening and the benefits of composting while planting small pots to take home. Following the success of these workshops, a discussion was held about relocating a raised garden, which yielded tomatoes, eggplants, and carrots.

Liberty Square, a low-income apartment complex, became another community garden partner that successfully advanced health and well-being through gardening and walking initiatives. Starting in January 2024, the Property Manager partnered with CFHL. CCST conducted a garden workshop to teach sustainable gardening practices and inspired participants to create self-watering containers and compost. A community champion volunteered to assist with planting and garden maintenance, contributing coffee grounds as a soil amendment. CCST supported the initiative with soil, mulch, seedlings, and gardening resources for two portable garden



boxes. Throughout FFY24, various crops, including lettuce, beets, peas, garlic, kale, jalapeños, cucumbers, and habaneros, were planted as CCST continued to offer workshops and support for the garden.

CCST also emphasized teaching young children about food sources through engaging activities. At Valle del Sol, a low-income housing site, they organized a scavenger hunt, and kids got to participate by hunting for gardening tools and materials. They followed the hunt with a reading of *“Potter the Otter: A Tale About Water,”* encouraging healthy beverage choices. At the Casa de Esperanza and Wysteria Head Start programs, CCST educators led fun interactive activities, allowing children to vote on which vegetables to plant in their garden beds and reinforcing lessons about fruits and vegetables through coloring and story time.

Access to Physical Activity Opportunities

After successfully implementing gardening workshops at Liberty Square, CCST initiated a Walking Club, encouraging residents to engage in regular group walks and stretching exercise sessions. In March '24, CCST expanded the initiative by forming a walking club for residents of Gleason Park Apartments, where participants engaged in stretches and walked 4-5 laps in a nearby park, about 1.25 Miles. Additionally, CCST organized various health and nutrition initiatives at St. George’s Catholic School and Casa de Esperanza, which included outreach, fitness sessions, and engaging gardening projects for children.

In July 2024, a new walking club began for St. Edward Catholic Church parishioners. The walking club explores different routes and scenic spots each week, such as Garden Acers Park. Participants enjoy infused water after their walks. As the club progressed, participants connected well and enhanced the enjoyment of the walks by maintaining an active lifestyle. The Walking Club and gardening initiatives exemplify a successful community engagement model, promoting residents' health and well-being.

