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Barriers to Policy, Systems, and Environment Work: Using Community Engagement as a Tool in SNAP-Ed's Multi-Level Comprehensive Programming

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Implementing policy, system, and environmental (PSE) changes has several well-known challenges that have been documented in Supplemental Nutrition Assistance Program Education's (SNAP-Ed) comprehensive approach to obesity prevention and reduction. The purpose of the current study was to explore the use of community engagement (CE) as a strategy to address the common challenges experienced in implementing a multi-component community-based program. Phone interviews (N = 7) were conducted with SNAP-Ed educators in Utah using semi-structured interviews. Emergent themes were identified as transcripts were coded independently by two researchers until a high level of agreement was achieved. Four themes emerged from the interviews: barriers to PSE progress, educator CE, the perceived value of using a CE approach to PSE work, and future supports that could increase educators' ability to use CE when doing PSE work. While effective at eliciting long-term improvements among priority populations, there are several well-documented challenges associated with developing, implementing, and sustaining PSE projects. CE, defined as the process of involving members of a community in the planning, design, implementation, and improvement of a community-based initiative, may be an effective strategy to overcome many of these challenges and lead to long-term PSE changes and improved health outcomes.

Keywords: community engagement; policy, system, and environment change; community nutrition; multi-level interventions; SNAP-Ed

Background

Many public health challenges, including obesity and chronic disease prevention, are complex and require a multi-component, comprehensive approach to address them. Public health programming is often informed by the social-ecological model (SEM; Langille & Rodgers, 2010; O'Neal & Ewing, 2017). The SEM describes how all sectors of society combine to influence an individual's health choices (Golden & Earp, 2012; United States Department of Agriculture

[USDA], 2019). McLeroy and colleagues (1988) have defined five levels of influence making up the SEM, including interpersonal factors, intrapersonal processes and primary groups, organizational factors, community factors, and public policy (Golden & Earp, 2012). Comprehensive programming to address chronic diseases and other health outcomes targets multiple SEM levels of influence to impact individual outcomes. Community engagement is a tool that can be used by public health professionals to build effective, sustainable, comprehensive programs (O'Mara-Eves et al., 2015).

The Supplemental Nutrition Assistance Program Education (SNAP-Ed) is a federally funded community nutrition program that seeks to improve the dietary and physical activity behaviors of low-income households (USDA, 2019). Low-income and food-insecure populations are more susceptible to chronic diseases due to a combination of influences, including limited access to healthy and affordable foods (Naja-Riese et al., 2019). SNAP-Ed utilizes evidence-based, multi-level comprehensive programming to address some of these factors (USDA, 2019). Multi-level comprehensive programming refers to programs that concurrently target more than one sector of influence on a given behavior. Sectors of influence that may be targeted include, but are not limited to, individual behaviors, policy changes, marketing strategies, and improvements to various environments. For example, SNAP-Ed programs targeting fruit intake may offer workshops on how to increase daily fruit consumption, partner with local agencies to promote produce incentive programs to improve the affordability of fruit in specific communities, and fund a social marketing campaign about the benefits of fruit through billboards, bus ads, and public service announcements. While initial evidence supports the effectiveness of multi-level, comprehensive programs, there are documented challenges associated with this type of programming. This paper explores the use of community engagement as a strategy to address common challenges to implementing a multi-component community-based program.

Comprehensive Program Description & Review of the Literature

One component of multi-level comprehensive programming that has been a recent focus of public health programs, including SNAP-Ed, is intervening at the organizational and community levels to address contributors to lifelong health behaviors (Haynes-Maslow et al., 2018; USDA, 2019). In SNAP-Ed, this has been coined policy, systems, and environments (PSE) work. Changes to PSEs are often complemented by direct education that improves individual-level characteristics like knowledge and skills about healthy living and other public health approaches, including social marketing (USDA, 2019). Multi-level comprehensive programming in the public health sector can elicit long-term behavioral change in individuals (Golden & Earp, 2012).

While PSE work can be part of an effective strategy to create healthier communities, there are many documented barriers, including obtaining community support, difficulty identifying partners, and time limitations (Franck, 2016; Haynes-Maslow et al., 2018). Community engagement (CE), defined as the process of involving members of a community in the planning,

design, implementation, and improvement of a community-based initiative, may be a valuable strategy to help overcome these barriers and support multi-level programming (Swainston & Summerbell, 2008). While there is a shared definition of CE, there are many different models of how to conduct CE. CE practices can vary in their theoretical foundation, structure, scale, duration, and amount and type of stakeholders involved (O'Mara-Eves et al., 2015). Specific models of CE include the socio-ecological model, Active Community Engagement Continuum, Diffusion of Innovations, and community-based participatory research, among others (Cyril et al., 2015). Despite the various models of CE, there are commonalities among CE practices. CE allows public health practitioners to understand the needs and interests of the community from multiple perspectives. It can help build the community's trust while also giving community members and organizations the capacity to deliver and sustain meaningful programs (McCloskey et al., 2011). Successful CE often involves developing strong partnerships or coalitions that include members from multiple sectors of influence. Partnerships allow for collaboration through shared decision-making, leveraged resources, increased influence, and diverse expertise. Collaborative efforts may be more effective at mobilizing change at the community level than individual organizations working alone (Butel et al., 2018).

Studies have shown that public health interventions that have incorporated CE have positive outcomes on health behaviors, specifically among disadvantaged groups (O'Mara-Eves et al., 2015). A meta-analysis of CE interventions showed that CE improved health behaviors, including health outcomes, individual self-efficacy, and perceived social support (O'Mara et al., 2015). A study aimed at improving health equity through prevention, education, training, and research found that engaging the community resulted in a trusted, culturally relevant program widely accepted in the community (Antoine-LaVigne et al., 2018). In addition to improving the outcomes and acceptability of the project, CE is also considered a cost-effective strategy that may enhance the sustainability of public health initiatives (Antoine-LaVigne et al., 2018).

Evidence suggests that CE might address many of the barriers encountered in PSE work. However, to date, there is limited research on CE's role in PSE work, specifically within SNAP-Ed, and the resources needed to help SNAP-Ed educators and others working in the public health sector utilize this tool in their work.

Study Purpose

This project utilized a qualitative method to examine the following research questions:

1. What were the barriers described by SNAP-Ed educators to conducting PSE work? And how did CE emerge as an approach as part of their multi-component programming?
2. How did SNAP-Ed educators describe their preferred future supports related to CE as an approach to accomplishing PSE work?

Method

Phone interviews ($N = 7$) were conducted with SNAP-Ed educators in Utah using a semi-structured interview guide in April 2020. Thirty-nine educators were eligible for the study. A purposive sampling strategy was used to target educators from a combination of rural and urban counties with a range of experience in delivering programming. The data collection for this project was determined to be non-human subjects research by the Utah State University Institutional Review Board (Protocol # 11175).

Data Collection Procedures

To recruit participants, a state-level coordinator for SNAP-Ed compiled a list of potential participants identified because of their level of experience doing PSE work and geographic location. Potential participants were recruited through an email invitation. One interviewer was used to maintain consistency. Contact information of interested participants was shared with the trained interviewer, who was not employed by the SNAP-Ed program. The interviewer contacted interested participants via email to schedule interviews. The interview began with a review of the elements of consent, followed by the questions outlined in the interview guide. Interviews were audio-recorded, uploaded to a password-protected folder, and later transcribed. The research team determined that saturation had been achieved as no new information emerged suggesting additional interviews were warranted.

Interview Protocol

The interview guide contained 15 open-ended questions with probes. For example, questions about SNAP-Ed educators' roles included describing their job to someone else and the most important thing they do in their job. Participants were also asked questions about barriers, facilitators, and resources that could be used to improve their PSE and community engagement efforts. Probes were used to promote additional discussion related to the core questions. The main interview questions, organized by PSE and CE topics, can be found in Table 1.

Table 1. Main Interview Questions Asked About PSE and CE

Topic Area	Question
PSE	<ol style="list-style-type: none"> 1. What do you think your role is in PSE changes? Follow up: Do you have a clear understanding of what counts as PSE? 2. What are or would be the benefits of having a strong PSE program in your county? 3. What challenges or barriers to work on PSE projects consistently throughout the year do you face? 4. What resources or tools could state leadership and/or supervisors provide to nutrition educators to be able to work more effectively on PSE projects every month?
CE	<ol style="list-style-type: none"> 1. How comfortable are you engaging in coalitions, workgroups, and leadership groups related to PSE efforts? 2. What types of skills and supports could the SNAP-Ed state office provide you with to improve your community engagement?

Data Analysis

We used a general inductive data analysis approach (Thomas, 2006). The interview guide and research questions informed the development of the codebook. Two members of the research team coded the same three transcripts independently to develop interrater reliability and the codebook. Next, the coded transcripts were compared for differences in coding. The coders achieved a high level of agreement in coding (approximately 90%). The codebook included agreed-upon codes, as well as the definition and an example quote for each code. The final codebook was defined, and the remaining transcripts were divided evenly between the two coders. The coded data were then organized into data tables, organized by code, and were synthesized by two members of the research team by examining consistent descriptions within codes and outlier descriptions by participants.

Results

Interviews with SNAP-Ed educators ($N = 7$) were conducted to understand the facilitators and barriers to doing PSE work as part of a multi-component program and the potential role of CE in PSE work. All recruited participants agreed to participate in the study. The participants were all female SNAP-Ed educators who worked through Utah State University Extension County offices. Fifty-seven percent of participants worked in rural counties, and 43% worked in urban counties. The time employed with SNAP-Ed ranged from less than one year to over 19 years, with an average of 4.5 years.

Participants defined their primary role as providing nutrition education to low-income individuals and families to improve their knowledge and skills to lead healthy lives. Participants also described what they believed their role in PSE work was as part of a multi-component program. Overall, participants defined their primary role in PSE as supporting organizations in making changes to make the healthy choice easier for community members. For example, one participant said, “Our role is just to help organizations know how to make the [PSE] changes themselves ... and make it so that the healthier choice is the easier choice for the people coming in.” Participants described building partnerships with pantries to be able to create a sustained effort that was not reliant on the SNAP-Ed educators. In a few cases, participants described seeking opportunities to initiate PSE work.

From the interviews, four themes emerged that were directly informed by the research questions and interview guide. The themes described below included barriers to progress, educator CE, the perceived value of using a CE approach to PSE work, and future supports that could increase educators' ability to use CE when doing PSE work. It is important to note that while participants were asked explicitly about PSE work, CE often emerged in their responses as a tool they used (e.g., engaging with other organizations) or an area for growth.

Barriers to Progress: The Intersection of PSE Work and CE

Participants expressed some challenges when implementing PSE work and using CE as part of a multi-component program. The barriers described fell under three main areas: (1) the challenging nature of PSE work, (2) difficulty with collaborations and partnerships, and (3) special circumstances because of rurality.

The first barrier mentioned by participants was the inherent challenges in the structure of PSE and CE work. Participants noted that PSE could be overwhelming, projects can be challenging to maintain, and it can be complicated to start a PSE project when others already exist. For example, one participant explained,

I think for people who really like or need structure then PSE can be a little more difficult because it's not like a class you teach ... with PSE work, it's a little more scattered and sometimes kind of fly by the seat of your pants.

Participants also talked about how existing programming made it difficult to initiate new PSE work.

The second barrier to PSE work was establishing and maintaining relationships in the form of collaborations and partnerships, which is a type of CE work. Specifically, participants emphasized concerns about PSE interventions that appeared to question the historical work of a potential partner, especially with schools. One participant explained,

When we were asked to go into the school cafeteria and talk to them about how to rearrange [things] ... to make it more accessible to the kids that want fruits and vegetables ... that was a hard one because I had known the lunch ladies for a long time and ... that's really hard because they're kind of 'this is my job and you're telling me I'm not doing it right?'

Participants also described their fear of being rejected, resulting in discomfort in seeking out partnerships. Finally, participants frequently talked about finding partners that were either too busy or already had their projects in place.

The third barrier described by participants was the impact that rurality had on their ability to conduct PSE work. Rurality was often depicted as having either too few or too many potential collaborators. In urban environments, participants talked about many organizations that do similar work, making it a challenge to know where to start. One person described this by saying, "Other counties do so great because they live in smaller towns, so they can easily do more things. It's just hard because there's just so many options and ... they already have an organization [they work with]." Conversely, participants from rural areas described the limited resources, which resulted in fewer opportunities to work on PSE. One participant said, "Being in

a rural county is sometimes a challenge. Not having as many programs to be able to [work with] ... I'm constantly on the lookout trying to say, 'how could this work?'"

Educator CE Approach to PSE Work

Participants explained their approach to PSE and the use of CE in doing PSE work. Participants were comfortable overall taking an active role in workgroups, leadership groups, and coalitions. Within these settings, participants talked about their incorporation of PSE by injecting it into existing conversations. Specifically, one participant said they "talk about the program all the time" as a way to "reach out and make connections." Another participant explained that their approach is to discuss PSE ideas at existing locations where other programming components are already taking place. Participants also talked about how once you have built a reputation in the community, PSE work is easier to do. One participant said,

I've been doing this job for 3 or 4 years. ... But now that my face is out in the community, I'll have businesses and people approach me wanting to do PSE things. ... It's awesome to have people initiate things, and it's not always me having to go out of my way.

Perceived Value of PSE Using CE

When talking about their work, participants had differing ideas when asked to describe the value of doing PSE work using a CE approach. Their responses fell into two areas: benefits to the SNAP-Ed program and benefits to the community. PSE work was discussed as valuable to the multi-component program because it helped program educators understand the needs of their community, make additional community connections to bolster other components of the program (e.g., direct education), and increase program reach. For example, one participant said, "I think it makes the program more successful ... because I obviously can't be in multiple places at once, and so having ... these PSE efforts ... it's prolonging my efforts after I leave the scene." On the other hand, participants also talked about the value PSE work has on the community. Specifically, that PSE work could reach more people than direct education and illustrates that the healthy choice is an easy one.

Educator Identified Supports to Improve PSE Work Using CE

Participants described specific tools and resources that could improve their ability to do PSE work using a CE approach. Specifically, participants discussed how the state SNAP-Ed office could utilize their existing social capital to connect them to local organizations to start forming collaborative relationships. One participant said, "Sometimes [state SNAP-Ed] has more connections than [local county Extension offices] do, so if they could contact a lot of people at once to find out who is interested in a certain program and then get us a list" that would be a

helpful approach. The state SNAP-Ed office was also identified as a potential resource to provide additional on-the-ground support:

I think a more hands-on approach would be nice. If [they] were to come to my area and say, 'OK, well, let's go around your town, and we can kind of see what is available, and I can help you' and say, 'we could do this.'

In addition to providing direct local support from program leaders, some participants talked about how they could use more program educators to do PSE work and engage with community organizations. Participants felt they currently did not have the capacity to do all components well of the comprehensive program. Finally, participants described several concrete skills they could benefit from gaining through professional development opportunities, including training that helped them pitch their programming, connect more effectively with organizations, and help with goal setting related to PSE work.

Discussion

Results from this study found multiple challenges to conducting PSE work and the intersection of using CE as an approach to PSE work among SNAP-Ed educators in Utah. Barriers described included difficulty identifying and maintaining local partners, initiating projects, time, and sustaining PSE efforts. While these barriers are consistent with the findings of previous research (Franck, 2016 & Haynes-Maslow et al., 2018), they expand our understanding of specific barriers to PSE work and how a CE approach can act as a solution to specific barriers. Participants spoke about the importance of forming and maintaining collaborative relationships to progress PSE work but recognized the great difficulty in doing so. To address this barrier, participants suggested leveraging the state SNAP-Ed office's social capital, defined as the ability to use social structure to facilitate action within a network (Coleman, 1988). Using this social capital would allow the state-level agency to help SNAP-Ed program educators identify local resources and develop relationships with their local organizations. However, reliance on the larger organization's social capital alone has resulted in non-persisting relationships (Edwards & McCarthy, 2004). Public health programs using a multi-component program that uses their organization's social capital when appropriate may better progress work in the community; however, it is important for local educators to focus on building relationships and their own social capital.

Identifying PSE work that was valued by other organizations and did not overlap with active projects was another barrier found in this study. A key component of CE that could help overcome this barrier is working with various community members in the early identification of the most pertinent issues to address (O'Mara-Eves et al., 2015). Interestingly, participant responses about working with others to conduct PSE work excluded individual community members and focused only on key stakeholders that held power within an organization. CE literature has shown that community members bring invaluable lived experience and expertise to

help identify the community's most pressing needs (Antoine-LaVigne et al., 2018) that could drive appropriate PSE interventions. Furthermore, residents can act as gatekeepers and resource brokers in helping SNAP-Educators identify potential partners with similar goals and missions. Such an approach would also address duplicative efforts, which is a critical consideration in rural communities where organizations may compete for resources (Haynes-Maslow et al., 2018).

Participants in this study also described time and competing job responsibilities as a barrier to PSE work. To overcome this, participants in the current study suggested increasing the capacity of the local SNAP-Educators by hiring additional workers. However, due to limited budgets, adding workers may not be a feasible solution. Instead, SNAP-Educators could consider how to engage the community to strengthen their work more effectively. For example, CE often results in projects better supported by the community, including partnering agencies (Antoine-LaVigne et al., 2018). The state SNAP-Educator program could provide educators with trainings to strengthen their understanding of CE and build skills to improve their ability to engage in CE (e.g., elevator pitches, strengthen collaborative networks) to support educators in their CE approach. Once a secure network of collaboration is achieved, the capacity to spread the responsibilities of the PSE work amongst more individuals and organizations can occur (Franck, 2016; Haynes-Maslow et al., 2018). It will ultimately reduce the amount of time required by any single individual or entity. Reducing the amount of time SNAP-Educators need to maintain the PSE work will free time to focus on other required program areas. In addition to allowing SNAP-Educators to fulfill the requirements of their position, it will also increase the likelihood that SNAP-Educators will influence multiple levels of SEM.

Sustaining program efforts and maintaining collaborative projects were final barriers to PSE work found in this and previous studies (Franck, 2016). PSE can be time and cost-intensive and is only effective in helping behavior change if implemented long-term. Research has shown that CE, as part of public health interventions, is associated with long-term benefits to the community (Antoine-LaVigne et al., 2018). However, as PSE work progresses towards achieving programmatic goals, obstacles such as changes in employment/leadership or funding may impact the trajectory of work. While projects supported by multiple sectors are less likely to be adversely affected by these obstacles (O'Mara-Eves et al., 2015), the suggestion by participants to have the state-level office provide on-ground support to overcome such barriers is a possible solution. It may increase the likelihood that a project can be maintained over more extended periods of time, promoting long-term positive community impacts.

While the findings of this study contribute to the literature and have implications for practice, there are several limitations to consider. The first limitation is the small sample size ($N = 7$). While the research team felt the responses reached saturation, a larger sample size would have allowed for a potentially richer understanding of additional resources to address barriers. In addition to reaching saturation, the study met the five criteria to meet "information power,"

which also suggests an adequate sample size (Malterud et al., 2016). Having diverse representation was valued in selecting participants to ensure both urban and rural experiences were represented. While participants did not come from a homogeneous geographic location, shared experiences are often crucial for qualitative methods (Moser & Korstjens, 2018). Finally, response bias is a concern in qualitative research as participants may seek to provide answers that please the interviewer or, in this case, the state-level organization that would see the de-identified results. A trained interviewer with no affiliation to the state-level organization was used to conduct all interviews to minimize response bias.

Implications for Practice

While using community engagement may be a logical strategy to help SNAP-Ed and other public health practitioners overcome common PSE barriers, training is essential. Previous to this study, SNAP-Ed educators received minimal training on how to work with community partners on SNAP-Ed projects. It was limited to professional communication and recruitment strategies. They had not received any training specifically for community engagement and how it can support PSE programming and improve community buy-in and sustainability.

This study found that SNAP-Ed educators felt comfortable taking active roles in local workgroups and identified the need for additional support and resources to engage communities effectively. Providing professional development opportunities for program educators would likely improve confidence and skills to use throughout the entire community engagement and PSE process. Meaningful skills to focus on in training may include conducting community needs assessments, recruiting key community members, community-driven goal setting, and group facilitation, all of which can be grounded in the importance of engaging community members and key stakeholders throughout their work. By emphasizing community member and stakeholder involvement, this can ensure that PSE work meets local needs, is driven by community members, and aligns with the cultural needs of the community. In addition, training that includes staff from local organizations with similar missions may be beneficial in building individual skills and creating networking opportunities. Networking could also help strengthen the reputation of the SNAP-Ed educators and program, opening new doors for PSE collaboration. Each SNAP-Ed implementing agency may have a different capacity for providing such training. It can vary from using the train-the-trainer model with the state-level staff training supervisors or leading SNAP-Ed educators at a regional level who then would train county staff to provide in-person training to all educators locally.

Further research should be conducted to analyze the effectiveness of community engagement in helping identify, develop, and implement PSE work in the public health sector. In addition to assessing the usefulness of the approach in the early stages of community-driven PSE projects, additional research on the long-term sustainability of projects and their impact on individual-level behaviors would be essential. If found to be an effective method to overcome commonly

reported PSE barriers, community engagement may become an integral part of comprehensive public health programs, such as SNAP-Ed, working at multiple levels of SEM.

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Acknowledgments

Create Better Health (SNAP-ED) pantry partners and CBH Ambassadors who assisted in this study. Utah State University Extension Administration for providing funding for evidence-based programming, as well as opportunities for expansion and program enhancement opportunities.