

# Catholic Charities Diocese of Stockton

## Nutrition Education

Throughout FFY 22, Catholic Charities of Stockton (CCST) delivered its popular *Cooking Matters* series. The series includes six sessions with five lessons. The sixth class consists of a review, celebration, and administration of the *Cooking Matters* post-test. Sessions include nutrition education, food preparation, and recipe tasting. Participants receive *Cooking Matters* bags with produce and ingredients for the recipe of the day during the in-person classes. Most sessions also included light physical activity. Participants are awarded a certificate of completion at the last class. To keep participants engaged, staff incorporated best practices such as using culturally relevant foods, providing materials in multiple languages, using vibrant visuals, and encouraging interaction through participatory learning. The agency implemented two *Cooking Matters* series in FFY 22, which reached 23 adults.

Additionally, CCST delivered two series of *Eat Healthy, Be Active Community Workshops* that reached 17 adults. Classes were conducted mostly in Spanish during virtual and in-person sessions. The workshops consisted of six 90-minute sessions, and topics included *Enjoy Healthy Food that Tastes Great*, *Eating Healthy on a Budget*, and *Activity is Key to Living Well*.

CCST also delivered 32 single sessions at community partner sites including a preschool, community college, senior center, and middle school using either the *Food Smarts for Adults* or *Eat Healthy, Be Active* curriculum. The engaging classes reached 830 adult participants.

CCST incorporated indirect education to enhance its direct education and PSE efforts. Facebook and Instagram which reached 39,308 individuals were used to engage community members and publicize upcoming events. Healthy recipes were posted on parishes' websites and recipe cards were added to food bags at food distributions. Flyers that advertised upcoming nutrition education classes were posted at churches and community centers. CCST's indirect activities reached nearly 40,000 people in San Joaquin and Stanislaus Counties.



# DEMOGRAPHIC DATA

for CCST's Evaluated Participants



88% 18 - 59  
12% 60+



77% female  
23% male



76% Latino



54.2% White  
7.3% Black  
2.4% Asian  
1.4% American Indian  
34.4% unknown/preferred no answer

for All Participants



870 participants were reached through direct education



56 direct education sessions were offered

## Evaluation Result

### Food Behavior Checklist (FBC)

Table 30 FBC Survey Data Analysis for CC Stockton (N=20) shows that across the 16 MT1 healthy eating and drinking survey questions, 9 showed statistically significant ( $p < .05$ ) changes. There was an increase in eating different types of fruits and vegetables as snacks and at the main meal, eating more grains, and drinking water 4+ cups of water per day. Indeed, participants indicated they were eating one-third cup of fruit and one and one-third cups of vegetables more than before the nutrition education class. There was also a significant decrease in drinking fruit drinks, sports drinks, or punch.

Four of the five MT2 food resource management/smart shopping questions had significant increases: reading the nutrition facts label, preparing a list before shopping, and buying low-sodium and low-sugar foods.

All three of the MT3 PA questions showed statistically significant increases in the number of days of exercising for at least 30 minutes, muscle strengthening, and making small changes to be active.

Finally, the participants used the survey's 10-point scale to rate their eating habits and showed a statistically significant 1.9 increase from pre to post-test.

The participants of CCST's FBC evaluation included 63% aged 18 – 59 and 37% aged 60+. 85% of participants were female and 15% were male. Ethnically, 55% were Latine. Racially, 50% were White, 5% were Asian, 5% were American Indian, and 40% preferred not to respond.

The *Indicators of Success* on the next page summarize 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 CalFresh Healthy Living 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 30 FBC SURVEY DATA ANALYSIS FOR CC STOCKTON (N=20)

Survey Question Topic	p-Value	Type of statistically significant change
<b>MT1 Healthy Eating</b>		
1. Eat F&Vs as snacks	<.001	Increase
2. Drink sports drinks	.016	Decrease
3. Citrus fruit or juice	.104	None
4. Drink regular soda	.019	None
5. Milk with cereal	1.000	None
6. Cups of fruit	.014	Increase
7. Cups of vegetables	.001	Increase
8. Different fruit	.003	Increase
9. Different vegetables	.002	Increase
10. Drink Milk	.494	None
11. Take the skin off chicken	.119	None
12. Eat Fish	.186	None
13. Eat >2 vegetables	.036	Increase
14. Eat whole grains	<.001	Increase
15. Drink low/fat-free milk	.430	None
16. Cups of water	<.001	Increase
<b>MT2 Food Resource Management</b>		
1. Use Nutrition label	<.001	Increase
2. Run out of food	.330	None
3. List before shopping	<.001	Increase
4. Buy low-sodium food	<.001	Increase
5. Buy low-sugar food	.002	Increase
<b>MT 3 Physical Activity</b>		
1. >30 min exercise	<.001	Increase
2. Strengthen muscles	<.001	Increase
3. Make small changes	<.001	Increase
<b>Self-Rating</b>		
1. Rate eating habits	.003	Increase





# INDICATORS OF SUCCESS



## FRUIT

65%\* eat at least 1 kind of fruit each day, always or often

100% ate at least 1 cup or more of fruit per day

65% ate the recommended 1.5+ cups of fruit per day



## VEGETABLES

75%\* eat more than 1 kind of vegetable each day, always or often

90% ate at least 1 cup of vegetables each day

80% eat fruit and vegetables as a snack



## DRINK CHOICE

55% never drink regular drink soda

80%\* drink 4 or more cups of water every day

95%\* do not or only sometimes drink sugary sports drinks

## PROTEIN & GRAIN

80% take skin off chicken always or often

85% ate fish during the past week

75%\* eat whole grain foods always or often

## HEALTHY HABITS

75%\* buy foods with lower added sodium, always or often

75%\* use the nutrition label when shopping, always or often

85%\* make a shopping list before going shopping, always or often

90% never or sometimes run out of food before the end of the month

80%\* exercise 2+ days of muscle strengthening

65%\* exercise >30 minutes at least 3 days per week

## Cooking Matters (CM)

CC Stockton collected 22 matched pre and post-test *Cooking Matters* surveys from adult participants via pen-to-paper. Among the CM participants, 87% were aged 18 – 59 and 19% were aged 60+. The participants were 95% female and 5% male. 100% of the participants identified ethnically as Latine. Racially, 46% of participants were White and 54% preferred not to respond.

The following tables show the results for questions that are consistent with the SNAP-Ed Evaluation Framework’s MT1 Healthy Eating and MT 2 Food Resource Management outcome indicators. 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.

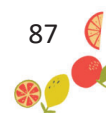
### Questions 1-16: Healthy Eating Behaviors

As shown in *Table 31* Healthy Eating Behaviors Gleaned From Cooking Matters (N = 22) the analysis of questions 1-16 revealed 12 questions that showed a statistically significant change from pre to post-test. There was a statistically significant increase in five healthy eating and drinking behaviors: the consumption of fruit, green salad, non-fried vegetables, whole grains, and eating low-fat dairy products. There was also a significant increase in drinking water, 100% citrus juice, and low-fat milk. When dining out there was a decrease in eating fast food and an increase in choosing healthy options in sit-down restaurants. Two resource management smart shopping behaviors, buying low-sodium food options and lean meats and beans for protein, also showed statistically significant increases.

An encouraging behavior that did not show a statistically significant change was that three-quarters of respondents were drinking sugar-sweetened beverages such as soda once a week or less or not at all.

**TABLE 31 HEALTHY EATING BEHAVIORS GLEANED FROM COOKING MATTERS (N = 22)**

Survey Question Topic	p-Value	Type of statistically significant change
1. Eat fruit like apples, bananas, melons, or other fruit	<.001	Increase
2. Eat Green salad	<.001	Increase
3. Eat French fries or other fried potatoes like home fries, hash browns, or tater tots	.648	None
4. Other kinds of non-fried potatoes	.234	None
5. Eat Refried, baked, pinto, black, or other cooked beans	.200	None
6. Eat Non-fried vegetables like carrots, broccoli, and green beans	<.001	Increase
7. Times a week typically eat a meal from a fast food restaurant?	.021	Decrease
8. 100% fruit juice like orange, apple, or grape juice	.038	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	.006	Increase
11. When you have milk, how often do you choose low-fat (skim or 1%)	.010	Increase
12. How often do you choose to eat low-fat or fat-free dairy products	.005	Increase
13. How often do you choose to eat whole-grain products like bread, pasta, and rice	.009	Increase
14. How often do you choose low-sodium options when you buy packaged foods	<.001	Increase
15. 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
16. When you eat at fast food or sit-down restaurants, how often do you choose healthy foods	.010	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.

\*Level of significance is  $p < 0.05$ .

### Questions 17-29: Cooking, shopping, and eating behaviors

Table 32 Cooking, Shopping, and Healthy Eating Behaviors Results from CM (N = 25) contains 13 questions. Three questions are related to cooking attitudes, two questions are on healthy eating, and eight questions are on food resource management.

As seen in Table 32 Cooking, Shopping, and Healthy Eating Behaviors Results from CM (N = 25), among the three cooking attitude questions (i.e., Q17, 18, and 19) all three showed a statistically significant decrease in participants feeling that cooking was burdensome, frustrating, or took too much work after experiencing the *Cooking Matters* classes and gained knowledge on how to prepare healthy meals quickly and easily for their family. The two MT1 healthy eating questions showed significant increases in eating a timely breakfast and in eating from the five food groups each day. Among the eight resource management questions, all showed statistically significant changes including grocery shopping practices such as comparing prices, using a grocery list and reading the nutrition facts labels. Participants also showed significant increases in preparing meals from scratch using healthy budget-friendly ingredients.

**TABLE 32 COOKING, SHOPPING, AND HEALTHY EATING BEHAVIORS RESULTS FROM CM (N = 25)**

Individual Questions	*p-Value	Type of statistical significance change
17. Cooking takes too much time	<.001	Decrease
18. Cooking is frustrating	<.001	Decrease
19. It is too much work to cook	.013	Decrease
20. How often do you compare prices before you buy food?	<.001	Increase
21. How often do you plan meals ahead of time?	<.001	Increase
22. How often do you use a grocery list when you go grocery shopping?	<.001	Increase
23. How often do you worry that your food might run out?	.088	Increase
24. How often do you use the “nutrition facts” on food labels?	<.001	Increase
25. How often do you eat breakfast within two hours of waking up?	<.001	Increase
26. How often do you eat food from each food group every day?	<.001	Increase
27. How often do you make homemade meals “from scratch” using mainly basic whole ingredients like vegetables, raw meats, rice, etc.?	.006	Increase
28. 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?	<.001	Increase
29. 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 30-35: Healthy foods self-confidence

As noted in Table 33 Healthy Foods Self Confidence Survey Results from CM, 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. 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 33 HEALTHY FOODS SELF CONFIDENCE SURVEY RESULTS FROM CM (N = 25)**

Individual Questions	*p-Value	Type of statistical significance change
30. How confident are you that you can use the same healthy ingredient in more than one meal?	<.001	Increase
31. How confident are you that you can choose the best-priced form of fruits and vegetables (fresh, frozen, or canned)?	<.001	Increase
32. How confident are you that you can use basic cooking skills, like cutting fruits and vegetables, measuring out ingredients, or following a recipe?	<.001	Increase
33. How confident are you that you can buy healthy foods for your family on a budget?	<.001	Increase
34. How confident are you that you can cook healthy foods for your family on a budget?	<.001	Increase
35. How confident are you that you can help your family eat more healthy	.002	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.

### Intent to Change (ITC)

A total of 228 *Intent to Change* (ITC) surveys were collected in FFY 22. Among the participants were folks aged 18 – 59 (90%) and folks aged 60+ (10%). Participants were 74% female and 26% male. Ethnically, 73% of participants were Latine. Racially, participants were 55% White, 8% Black, 2% Asian, 1% American Indian, and 32% either preferred not to respond or did not respond at all. All of the surveys were gathered in a classroom setting via pen-to-paper by CC Stockton.

The following tables, summarize the aggregated data as follows:

- The first three columns provide the survey topic question, the number who responded to the question data, and the percent not currently practicing the desirable behavior
- The last two columns provide data on the number not practicing the healthy behavior and the percentage who intend to change their behavior from among those not currently practicing the desired behavior.

As shown in *Table 34* Intent to Change Behavior Related to Increasing the Consumption of Healthy Foods and Beverages, Results from the ITC, across the five healthy eating behaviors the highest unhealthy practice was for not eating from all 5 food groups each day (58%). Two eating behaviors, eating fruit (6%) and choosing smaller portions (24%) showed the lowest unhealthy behaviors. Eating from the five food groups and whole grains every day had the highest percentage of not eating healthy (~55%) but approximately three-fourths of those respondents indicated they would practice those behaviors more

often next week. Overall, when the five healthy eating behaviors were combined and analyzed, among the 46% who were not practicing healthy behaviors, 74% indicated that they would practice a healthy eating behavior in the coming week.

**TABLE 34 INTENT TO CHANGE BEHAVIOR RELATED TO INCREASING THE CONSUMPTION OF HEALTHY FOODS AND BEVERAGES, RESULTS FROM THE ITC**

During the past week, did you...	Number surveyed	% not practicing healthy behavior	# not practicing healthy behavior	% who Intend to do the healthy behavior “More Often” within the next week
Eat foods from all 5 food groups each day?	45	58%	26	77%
Eat whole grain products every day?	105	51%	53	70%
Eat a breakfast that includes at least 3 food groups?	4	50%	2	100%
Choose a smaller amount of food or beverage?	17	24%	4	100%
Eat fruit at least 2 times a day?	17	6%	1	100%
Combined during the past week did you eat healthy foods?	188	46%	86	74%

As shown in *Table 35* Intent to Change Behaviors Related to Reducing the Consumption of Unhealthy Food or Beverages, Results from the ITC, half of the respondents reported eating fast food in the last week and nearly two-thirds intend to eat less fast food in the coming week.

**TABLE 35 INTENT TO CHANGE BEHAVIORS RELATED TO REDUCING THE CONSUMPTION OF UNHEALTHY FOOD OR BEVERAGES, RESULTS FROM THE ITC**

During the past week, did you...	Number surveyed	% not practicing healthy behavior	# not practicing healthy behavior	% who Intend to do the unhealthy behavior “Less Often” within the next week
Eat fast food?	10	50%	5	60%

As shown in *Table 36* Intent to Change Behavior by Practicing a Smart Shopping Behavior Next Time, Results from the ITC, 60% respondents did not plan meals and two out of five did not prepare a list before going grocery shopping. However, slightly more than half indicated they will plan meals before shopping and two-thirds indicated that they would make a grocery list the next time before they go shopping. When combined, nearly two-thirds of the 30 respondents indicated an intent to practice the two food resource management behaviors.



**TABLE 36 INTENT TO CHANGE BEHAVIOR BY PRACTICING A SMART SHOPPING BEHAVIOR NEXT TIME, RESULTS FROM THE ITC**

During the past week, did you...	Number surveyed	% <u>not practicing</u> the FRM behavior	# not practicing FRM behavior	% not practicing the FRM behavior who indicated “Yes” they will do it the next time
Plan meals before going to the store?	15	60%	9	56%
Make a list before going to the store?	15	40%	6	67%
Combined: FRM behaviors in the past week.	30	50%	15	62%

\*FRM: Food Resource Management behavior

## Policy, Systems, and Environmental Changes

### Access to Physical Activity Opportunities

In FFY 22, CCST continued to support the walking club created by participants from Our Lady of Guadalupe Church who attended an *Eat Healthy, Be Active* nutrition education series in 2020. Participants wanted to continue the healthy habits they learned during the classes and increase their physical activity. Six to eight participants meet 5-6 days a week to walk trails in two local neighborhoods and commit to walking at least 10,000 steps a day. They set weekly goals for increasing their steps. CCST provides support with water bottles as reinforcement items.



Participants of an FFY 22 *Cooking Matters* nutrition education session for parents at Cardoza Middle School voiced interest in wanting to increase their physical activity but described concerns over falling as a barrier to walking in the neighborhood. In response, CFHL staff suggested that participants form a walking club to enhance safety and accountability. The CCST staff used their experience successfully establishing walking clubs at other sites to support the group. CCST staff provided the walking club with a video about stretching and led the first gathering. The club participants worked together to decide the route and time that was most ideal for the group. Since it began, the walking club has expanded to include other community members. In addition to encouraging physical activity, the walking club has also fostered strong friendships. CCST CFHL provides support as needed, and a community Champion has been identified to coordinate the group.

CCST also began working on creating safe physical activity opportunities for older adults throughout FFY 22. Several CCST staff members were trained in the *Matter of Balance* curriculum, a program consisting of eight and two-hour classes with a group of approximately 8-12 participants. Trained coaches facilitate group discussions, role-play activities, exercise training, and more to reduce older adults’ fear of falling, improve their activity levels, reduce fall risks in their homes, and increase their overall strength and balance. The CCST staff plan to use the knowledge and skills they gained in the *Matter of Balance* training to conduct classes for older adult community members in FFY 23.

## Gardens

At many of the CCST Stockton PSE sites, the agency uses a multi-faceted approach to increase participants' consumption of fruits and vegetables and physical activity. Since 2019, CCST has partnered with Catholic Churches, public schools, and early childhood education sites to establish edible gardens to provide communities with access to fresh fruits and vegetables at no cost. At some locations, this approach supplements emergency food distribution.

In FFY 22, CCST assisted the Mission of Good Shepard Church with garden beds, planting tools, and seeds. A community champion volunteer was identified to help upkeep the garden area. Garden beds were purposefully elevated to ease participation for older adults. A group of older adults met weekly to maintain the garden, which produced lettuce, cilantro, and other produce.

CCST also created opportunities for young children to get involved in gardening. At the Head Start Preschool in Wisteria, youth were asked what they wanted to grow. Children were invited to plant the seed starters indoors. They successfully grew onions, radishes, and lettuce. Before the summer break, youth were given small plants to maintain throughout the summer.

## Access to Healthy Food & Nutrition Standards

Since 2016, nutrition standards have guided purchases and donations to CCST's Food Bank. The agency has continued to make improvements to its services, initiating the Healthy Food Bag Program in FFY 17, and coordinating with partners to provide higher-quality food to clients. In FFY 20, CCST offered the *Eatfresh.org Mini Course*, which includes topics like eating healthy, saving money, and cooking healthy meals, to food bank staff and volunteers. When the COVID-19 pandemic began in 2020, local churches and partners like Catholic Charities USA stepped up to fill the growing need for emergency food.



A new partnership with the Church of Latter-Day Saints (LDS) that began in FFY 21 enhanced the quality of food distributed by the CCST food bank. During FFY 22, CCST was awarded a \$5,000 LDS Humanitarian Grant to purchase fresh produce and other healthy food items that have historically been difficult to access in the area. Additionally, securing this consistent food source allowed for the expansion of food distributed to 10 low-income parishes. Through this partnership with LDS, the CCST food bank was able to distribute nutritious food boxes containing fresh produce, milk, canned goods, cereal, cheese, yogurt, soup, pasta, dry beans/rice, and meat. Food distribution is accompanied by a CFHL nutrition workshop, a recipe demonstration that features a food item being distributed that day, and CalFresh application assistance. The food bank reached 4,831 individuals with access to healthy food in FFY 22.

## Nutrition Pantry Program

CCST initiated a partnership with Leah's Pantry's *Nutrition Pantry Program* (NPP) in FFY 19 to implement improvements aimed at providing more client-centered, health-focused food distribution. The NPP offers resources, technical assistance, and training to help pantries improve their services and recognizes such improvements with gold or silver certification. In FFY 19, CCST completed the NPP's Healthy Food Pantry Assessment and developed a client survey to gather insight into clients' dietary restrictions, food preferences, and challenges that might limit their ability to cook pantry items. However, the COVID pandemic put the agency's NPP plans on hold as CCST worked to meet the enhanced need for access to emergency food in their service area.

More recently, CCST updated its NPP Work Plan and made several updates to its food bank to enhance community members' food distribution experience. For example, clients are welcomed by a produce cart showcasing available fresh produce, food items are neatly organized on new shelving units, and the pantry is freshly painted a bright, "produce green" color. Additionally, two large freezers donated in FFY 22 by the Rotary Club have enabled CCST to store and offer frozen meats to food distribution clients. CCST has also utilized guidance from the NPP program to inform improvements to the food bank such as reinstating a client-focused bulletin board, creating kits with recipes and accompanying ingredients, and completing a client needs assessment. In the upcoming year, CCST will continue to implement improvements based on the Work Plan.