





The Appal-TREE Project:

Community-Based Participatory
Research to promote healthy eating in
Appalachia

NIMHD Grant # R24MD008018

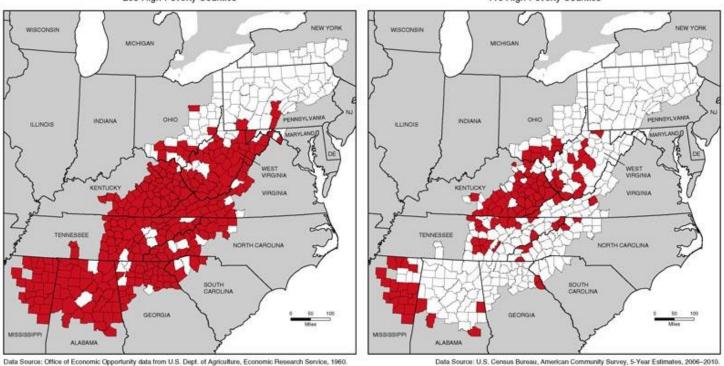
The Setting

High-Poverty Counties in the Appalachian Region

(Counties with Poverty Rates At Least 1.5 Times the U.S. Average)

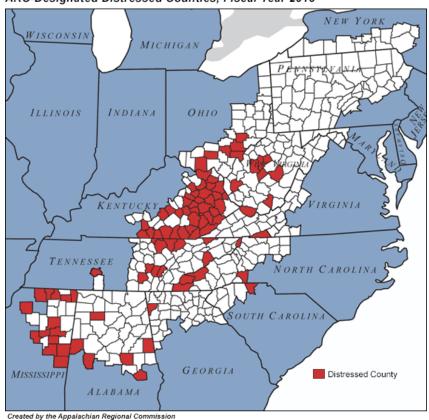
1960 295 High-Poverty Counties

2006–2010 110 High-Poverty Counties



Dietary implications of persistent poverty

ARC-Designated Distressed Counties, Fiscal Year 2015



Data Sources:

Unemployment data: U.S. Department of Labor, Bureau of Labor Statistics, LAUS, 2010–2012 Income data: U.S. Department of Commerce, Bureau of Economic Analysis, REIS, 2012 Poverty data: U.S. Department of Commerce, Bureau of the Census, American Community Survey, 2008–2012

- Rural poverty and related food access challenges lead to poor dietary outcomes
 - KY ranks 3rd for adolescent obesity
 - 3rd for those least likely to meet RDI for F&V

Community-Based Participatory Research (CBPR) Initiative in Reducing and Eliminating Health Disparities: Planning Phase (R24)

- Three year planning grant
- True CBPR
 - Year 1 was community assessment and determination of research topic and intervention strategy
 - Years 2 and 3 for pilot project implementation and evaluation
- Year 1
 - Establishment of Community Advisory Board
 - Partnership with Community Farm Alliance
 - Qualitative research, assets inventory, needs priorities

Who is the "community" in CBPR?

- Quantitative/survey research not well suited to exploratory questions
- Individual interviews focus on "leaders"
- Focus groups privilege the most vocal
 - Particular challenge in tight-knit, class-based rural communities of Appalachia
 - Hard to express dissenting opinions
- How can we know that the people sharing their views with us accurately represent "the community?"

Structured Public Involvement

- Two community forums, with wide net cast in invitations
 - Followed up with Web option
- Explanation of key components of intervention plan
- Participants gave immediate, but anonymous feedback using electronic keypads
 - High participant satisfaction (8.1/9)
 - High levels of participation (348 in a small, rural county)
 - Can create questions on the fly
 - Can cross-tab with demographics



Community Priorities

- Access to food NOT the priority we expected
- Cost of healthy food was a big issue, esp for those with HH incomes under \$50K
- Focus on youth
 - Significant concern about SSB consumption
 - Schools seen as major problem

The Appal-TREE Intervention

- ACT Now –
 Appalachians Cooking
 Together NOW
 - Six week cooking class
 - Knife skills, shopping, minimizing waste
 - Held in public housing, community centers



The Appal-TREE Intervention

- Go H₂0
 - Free water bottles and filling stations in all middle and high schools
 - Pro-water instead of anti-SSB
 - Addresses issue of poor water quality/taste







The Appal-TREE Intervention

- Farmers MarketSummer FeedingProgram
 - Partnered with school food service
 - One of first SFP located at farmers market
 - Anyone under 18 got free smoothie or breakfast burrito



Preliminary Outcomes

- Cooking classes 3 weeks post
 - Increase in monthly salad greens (2.7*), fruit (5.1), and vegetable (2.8) consumption
 - Decrease in candy (-7.9*) and chips (-3.7)
- Go H₂0
 - Over 20,000 bottles filled in 2 months
 - Increased frequency of water consumption by 0.13 days/month, compared to decrease of 1.84 days/month at control *
- FM summer feeding
 - At FM, 65% consumed at least ½ serving FV
 - Traditional SF site = 46.5% with ½ serving FV
 - At home meals = 22.6% with ½ serving FV

Next steps

- Through spring
 - Complete cooking classes, including 3 month followup data
 - Focus on Go H20 social marketing promotion
 - Incentives to bring water bottles every day
 - Promotional social media, poster, other campaigns to shift social norms
- Next grant
 - Build on pilot in one county to replicate in neighboring counties
 - Incorporate social marketing skills transfer through summer camp/workshop

Questions?

Mark Swanson, PhD
Department of Health Behavior
UK College of Public Health
Mark.swanson@uky.edu