Healthy Food Policies Documented through Food Service Contracts of North Carolina Public Universities

Presenter: Stacy Fandetti  
University: University of North Carolina at Charlotte

Objective: The study aims to determine if healthy food policies have been incorporated into North Carolina public university food contracts. Background: There has been a dramatic increase in the obesity rate among emerging adults in America, and most studies point to behavioral lifestyle factors as a primary cause. In 2019, the college enrollment rate for emerging adults in America was 41%. Thus, the college environment provides an optimal intervention setting for addressing the long-term health of emerging adults. Previous research has found that college students report low intakes of fruit and vegetables and high intakes of fat and added sugars, which may be due to many campus dining environments offering little support for healthy eating. Most university food retail is operated by a food service contract company (e.g., Chartwells). Contractors provide a wide variety of food services to a university, including dining halls, national brand quick-service restaurants, and catering. To our knowledge, there has been limited research examining the extent to which the food services provided in the university environment meet students’ nutritional needs. Publicly available university food service contracts can provide valuable information about university healthy food policies. Methods: This exploratory research brief evaluated the food service contracts from 14 North Carolina public universities using the 35-item North Carolina Food Service Policy Guidelines Assessment. Most of the criteria in this assessment are from the CDC Food Service Guidelines for Federal Facilities document, with the addition of three categories unique to North Carolina. The assessment has four categories: Beverages, Packaged Snacks, Prepared Foods, and Other. Additionally, we requested feedback from each university’s food service leadership team to confirm our findings. Results: Thirteen of the 35 North Carolina Food Service Policy Guidelines were incorporated into at least one university contract. The median number of guidelines per contract was four. The most frequently observed guideline was ‘protein foods from plants such as legumes, nuts, seeds, and soy products.’ No Packaged Snack guidelines were incorporated into any contracts. Of the 14 contracts evaluated, only six contained some nutritional standards for food offerings on campus. Seven of the 14 universities (50%) responded to our inquiry regarding the accuracy of the food service contract analysis. Of the seven responses received, two schools did not indicate they had any additional policies or practices beyond what we found in their contracts. The other five schools had between 2 to 14 guidelines they followed as a practice that were not written into their contracts. Implications: Obtaining public university food service contracts and evaluating them using the North Carolina Food Service Policy Guidelines Assessment is a cost and time-effective method for determining the healthfulness of a university food environment. However, food service contracts may not reflect all aspects of the campus food environment. Therefore, examining a contract is a valuable first step to beginning conversations with students and leaders about ways to make enhancements. Additionally, universities are encouraged to document healthy food policies in their food service contract for future evaluation and improvement efforts.
Qualitative Impact of TV and Social Media Advertising of Unhealthy Foods in Children

Presenter: Jennifer Carroll
University: University of Massachusetts

Objective/Background: A recent systematic review that examined food advertising influences on children’s attitudes, preferences and intake of unhealthy foods concluded that there is a lack of: 1) qualitative research; 2) understanding of newer media food ads (e.g., social media, pop-up ads); and 3) understanding of long-term health effects of food marketing (1). The WHO supports qualitative research to understand individual experience to inform intervention design and policies (2). Thus, we conducted a qualitative case study of 30 children (9-11 years), designed to understand the extent to which children understand being a target for unhealthy food marketing across digital media platforms. The goals of the study were to qualitatively describe: 1) the extent to which children (9-11 years) realize they are targets for unhealthy, processed foods; 2) if there were racial and ethnic differences in perception of being targeted; and 3) explore if BMI partially mediates (3) perception of being targeted for food ads. Methods: We collected data from 21 child-parent dyads (with 9 pending interviews) who resided in New Hampshire, Massachusetts, and Vermont from March 2022 to August 2022, to fill this gap. Children were interviewed (audio/video recorded) through Zoom and were asked about their media use, food advertisements they recalled seeing on different media devices, how they interact with ‘skip ad’ buttons (e.g., YouTube), and were asked to share a screenshot of an unhealthy food advertisement seen after the interview. Parents completed a survey for digital devices in the home, weekly time on the digital devices, and background demographics. Interviews were transcribed and themes were identified using NVivo (V20.6.1). Results: The findings of this proposal are on-going as a chapter in a dissertation. Implications: In conclusion, this study helps us to learn about current media use, perceptions of targeted ads, and may help inform interventions that can potentially improve children’s health.

Navigating the First Triennial Assessment of Local School Wellness Policies: Providing Guidance to School Meal Sponsors

Presenter: Sarah McKee
University: University of Connecticut

Objective: To provide technical assistance to Connecticut school meal sponsors in completing the triennial assessment of their wellness policies. Background: Under the USDA’s Final Rule on Local School Wellness Policy Implementation Under the Healthy, Hunger-Free Kids Act of 2010, all local educational agencies participating in the National School Lunch Program or School Breakfast Program must assess their local school wellness policy every three years. Sponsors must measure how their wellness policy is implemented and publicly post the results, including the extent to which schools are following the wellness policy, how the sponsor’s wellness policy compares to a model policy, and describe the sponsor’s progress towards attaining their wellness policy goals. The first assessment was due June 30, 2020, but the USDA offered nationwide waivers that pushed the deadline back
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August 17, 2022 – 4:00 - 5:15 p.m. ET

to June 30, 2022. Methods: Starting in spring 2021, our research group began collaborating with the Connecticut State Department of Education (CSDE) to create guidance and provide technical assistance for sponsors. Together, we developed a four-step process for completing the assessment. We also created instructions, worksheets, videos, and webinars to help sponsors fulfill all requirements. Additionally, we offered one-on-one assistance via email, phone, and virtual meetings. As the deadline approached, we helped CSDE verify whether sponsors had made documentation of the assessment available to the public, as required by the Final Rule. Finally, we tracked the steps the remaining sponsors had completed. Results: We hosted 14 webinars, with four covering the entire process, one covering the process for residential institutions, and nine covering individual steps. The webinars were attended by 203 individuals from 134 sponsors, several of whom attended multiple workshops. We were able to verify that 77 of the 171 sponsors in the state had posted all required documentation by June 30. A further 37 sponsors reported completing the assessment, but we could not locate their published reports. Anticipating this possibility, CSDE obtained approval from the USDA for a one-year extension of the deadline for the first triennial assessment, allowing the 37 sponsors to post their results and the remaining 57 sponsors to complete the process without facing corrective action. Implications: The federal requirement that school meal sponsors complete an assessment of their LSWP at least triennially leaves flexibility for sponsors to develop assessments that meet their specific needs. However, this flexibility also creates ambiguity, leaving many meal sponsors confused and overwhelmed. Our work with CSDE helped create a standard process with concrete steps that sponsors can follow to ensure they will comply with the federal requirement. As expected, many sponsors still did not meet the June 30, 2022 deadline. However, most sponsors in Connecticut reported that they met the requirements by the deadline and used our guidance to do so. State departments of education should consider examining what forms of guidance and technical assistance were most successful in their state and others, then apply this knowledge to future triennial assessment guidance to sponsors.

SNAP Online Grocery Delivery in California: Access Gaps During the COVID-19 Pandemic

Presenter: Charlie Hoffs
University: Stanford University

Objective: My research team and I sought to understand which communities were and were not able to order fresh (perishable) groceries online using SNAP EBT during the COVID-19 pandemic (https://doi.org/10.1016/j.healthplace.2022.102811). In particular, we wanted to understand if urban and rural areas had different levels of access to the program, and to what extent it reached low-income, low-access ("LILA" also known as "food desert" or "food apartheid") areas. We analyzed access in California because the state includes 10% of US SNAP participants, and SNAP grocery delivery coverage data was more available than other states. Background: During the COVID-19 pandemic, the SNAP Online Purchasing Pilot (OPP) rapidly expanded across the US, allowing SNAP participants to purchase groceries online for curbside pick-up or delivery. SNAP OPP had the potential to increase access to nutritious, safe, affordable food for elderly Americans, veterans, people with disabilities, and people living in rural areas. It can also mitigate inequities in low-income areas with low
access to grocery stores. If expanded to support diverse retailers nationwide, the program can potentially support small and rural grocers, food cooperatives, farm stalls, and farmers markets and increase competition in grocery retail. However, limited data and research on SNAP OPP hinders the development of evidence-based program improvements. In particular, identifying which areas can and cannot access delivery could help the USDA identify and address demographic and regional disparities in access. **Methods:** We analyzed SNAP participants' access to SNAP OPP from fall 2020 to early winter 2021 in California. We used chi-squared tests for descriptive analysis and OLS linear regressions to assess associations between SNAP OPP coverage and COVID case rates and limited food access areas. We analyzed Amazon, Walmart, and ALDI delivery availability because these were the only SNAP OPP retailers in CA during our study period. We measured the percentage of SNAP participants within the grocery delivery region of a SNAP OPP retailer at the county- and zipcode-level. **Results:** SNAP OPP reached 86% of California SNAP households in 2020–21. Still, 1/5 of those with access could only use one of the three retailers. Nearly half (47%) of all CA SNAP participants lived in LILA areas. 28% of all urban census tracts, and 40% of all rural census tracts, were classified as LILA areas. SNAP online delivery reached 87% of SNAP households living in urban LILA areas, but only 30% of SNAP households in rural LILA areas. **Implications:** There are urgent rural/urban disparities in access to SNAP online grocery shopping in California. Rural areas, which were more likely to be LILA areas, had limited access to SNAP grocery delivery. This does not account for disparities in technology access. 26% of Americans living in rural areas and 32% of those living in Tribal areas do not have high-speed Internet (known as “broadband”) (Federal Communications Committee). Policymakers can address these disparities in California and nationwide by rapidly onboarding new retailers into the SNAP OPP, particularly rural grocers; investing in innovative delivery and distribution pilots; and supporting rural technology access and digital literacy initiatives.

**Perceptions and Awareness of an Increase in the WIC Cash Value Benefit**

**Presenter:** Emily Duffy  
**University:** University of North Carolina Chapel Hill  

**Objectives:** Our objectives were to understand barriers and facilitators to WIC participants’ uptake of the pandemic-related increase in the Cash Value Benefit (CVB), and whether and how it influenced WIC households’ fruit and vegetable consumption.  

**Background:** Addressing disparities in fruit and vegetable consumption in childhood is important for chronic disease prevention. During COVID, the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) increased the CVB for FV by ~$25/person/month. **Methods:** We conducted 10 virtual focus groups with WIC participants (n=56) in North Carolina in March 2022. Sampled participants represented two subgroups: (1) rural WIC participants (5 focus groups) (2) urban/suburban WIC participants (5 focus groups). We used a semi-structured focus group guide to assess perceptions and awareness of the CVB change, barriers to using CVB, and perceived influence of the CVB change on fruit and vegetable consumption. Focus groups were recorded, transcribed, and open-coded. We used thematic analysis to uncover
consistencies within and between sampled groups. Results: Participants expressed favorable perceptions of the CVB increase and felt CVB was one of the most valued parts of the WIC food package. Participants stated the pre-COVID CVB amount was insufficient. Barriers to utilizing the increased CVB were finding WIC-eligible fruits and vegetables in stores, insufficient supply of appealing fruits and vegetables, and preferred stores for fruits and vegetables not accepting WIC. Facilitators were household preferences for fruits and vegetables and the variety of fruits and vegetables that can be purchased with the CVB. Many participants felt the CVB increase allowed them and their children to eat a wider variety of fruits and vegetables, serve fruits and vegetables more often, and worry less about food waste associated with trying new fruits and vegetables. Implications: The CVB increase was positively perceived by WIC participants in North Carolina and may reduce fruit and vegetable intake disparities, but barriers to CVB and WIC benefit utilization must be addressed. This study can inform future efforts to improve the WIC food package and access to fruits and vegetables.

WIC Participants’ Perceptions of the Cash-Value Benefit Increase During the COVID-19 Pandemic

Presenter: McKenna Halverson
University: University of Delaware

Objective: To characterize how changes to the CVB allotment during the pandemic impacted Delaware WIC participants’ perceptions of the benefit as well as their grocery purchases, food preparation, and fruit and vegetable consumption patterns. Background: In 2022, the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) served approximately 19,766 participants in Delaware, 15,397 of whom were infants and children. By reducing barriers to healthy food access that are common among low-income populations, WIC improves mothers’, infants’, and children’s outcomes in a variety of domains including increasing healthy food intake and lowering rates of obesity, as well as increasing birthweights, improving cognitive development and academic achievement outcomes, and reducing behavior problems among children when they enter school. These results are promising as infancy and early childhood are periods of significant growth and development that set the stage for future developmental outcomes. In Delaware, more than $2.9 million in additional fruit and vegetable benefits have been issued to WIC participants since April 2021. Recent changes to the WIC Cash-Value Benefit (CVB), which provides participants with a monetary benefit to spend on fruits and vegetables, have the potential to reduce disparities in healthy food access and food insecurity that were exacerbated by the COVID-19 pandemic. Pre-pandemic CVB allotments increased from $9/month for children and $11/month for adults, to $35/month for both women and children during the summer of 2021, before being adjusted in October to $24/month for children, $43/month for pregnant and postpartum women, and $47/month for breastfeeding women. However, few studies have examined how the changes to the CVB allotment that occurred during the pandemic influenced WIC participants’ perceptions of the benefit or their fruit and vegetable purchasing and consumption. Methods: We conducted semi-structured interviews with 51 WIC participants in Wilmington, Delaware. Survey measures included demographic questions, the Hunger Vital Sign food insecurity screener, and open-ended questions regarding perceptions of the CVB increase and its influence on participants’ fruit and vegetable
purchasing and consumption. Data were analyzed using a hybrid inductive and deductive coding approach. **Results:** Results demonstrate that higher CVB allotments increased WIC participants' purchasing and consumption of fruits and vegetables, increased the frequency of their shopping occasions, and enhanced their dietary variety. Additionally, our findings suggest that although participants highly value the higher CVB allotment, many believe that in order to meet their families' needs, it should be increased further. **Implications:** By advancing policymakers understanding of the beneficial effects of the increased CVB allotment, this study may promote health equity by increasing low-income children and families’ access to nutritious, affordable food.
Design and Usability Testing of the Personalized Healthy Eating Index Nutrition Report

Presenter: Meghan Zimmer  
University: Harvard University

Objective: To introduce the new Personalized Healthy Eating Index (HEI) Nutrition Report and to present results from usability testing.  
Background: The HEI is a measure of diet quality, independent of quantity, that assesses alignment with the Dietary Guidelines for Americans. The HEI has been used in multiple research contexts (e.g. nutrition surveillance, epidemiology and health outcomes research, policy and intervention evaluation) across all levels of the food stream. To further extend its application, a Personalized HEI Nutrition Report was developed for use in the clinical setting to provide feedback and allow for additional nutritional counseling about diet quality.  
Methods: A five-page report including a cover page and resources page was developed and underwent two rounds of user-testing research. In both rounds of testing, respondents participated in a mixed-methods session that captured data on eye-tracking, qualitative interviews, and satisfaction scales. Eye-tracking data were aggregated to form heat maps. Qualitative interview data were analyzed to identify themes; then grouped into required changes, high priority changes, and low priority changes.  
Results: Mixed-methods analysis of eye-tracking and qualitative interview data demonstrated that participants understood and liked the concept of a Personalized HEI Nutrition Report. Eye-tracking heat maps demonstrated participants viewed all sections of the report but spent more time reading about changes they “should make” to their diets (141 fixations) rather than changes they “could make” (108 fixations) or where they were “doing great” (66 fixations). Participants generally completed timed tasks correctly and succeeded in locating nutrition information included in the report. Design recommendations from qualitative interview data were incorporated into the final report, which will be available in English and Spanish. The report is currently being programmed as a new participant feedback feature of the NCI’s Diet History Questionnaire (DHQ). Future directions include pilot testing with a cohort of cancer survivors. The new Personalized HEI Nutrition Report for clinical use was designed, user-tested, translated, and is being incorporated into the NCI’s DHQ.  
Implications: Researchers will be able to use the free and publicly available DHQ to collect dietary data and generate a Personalized HEI Nutrition Report for each study participant. Clinicians can use the report to engage patients in nutrition counseling about their diet quality.

Food Sourcing Characteristics & Healthfulness of Foods at Select Minnesota Hunger Relief Programs During COVID-19 Pandemic

Presenter: Kakul Joshi  
University: Case Western Reserve University

Objective: To examine nutritional quality of food streams supplying food to hunger relief programs; and to understand the association of specific program characteristics with the overall nutritional quality of the inventory sourced.  
Methods: Food sourcing data, for hunger
relief programs (n=333) from 2 food banks in Minnesota. Data were aggregated across July-December 2020. Food Assortment Scoring Tool (FAST) was used to compute nutritional quality of 4 food streams available to programs (Federal, Purchased, Donated, and Rescued) as well as overall nutritional quality at the program level. Independent variables included program level characteristics, and food sourcing variables. Kruskal-Wallis test was used to assess significant differences in nutritional quality by food streams. Multivariable linear regression tested for association between program characteristics and overall program FAST.

**Results:** FAST scores varied significantly across food streams (p<0.001). Federal food streams (2) had highest nutritional quality (67.81, 65.00), followed by donation stream (63.40). The mean overall FAST across programs was 63.0 (SD: 3.35). Proportion of poundage from federal and donated sources had large positive magnitude of association with FAST; proportion of dry food poundage was negatively associated with the FAST.

**Implications:** Ensuring overall healthfulness of all food streams through food banks is a crucial first step to healthy hunger relief. Enabling programs to prioritize federal foods may lead to more equitable stocking of healthier inventory.

**Healthy Food Policies Documented through Food Service Contracts of North Carolina Public Universities**

**Presenter:** Stacy Fandetti  
**University:** University of North Carolina at Charlotte

**Objective:** The study aims to determine if healthy food policies have been incorporated into North Carolina public university food contracts. **Background:** There has been a dramatic increase in the obesity rate among emerging adults in America, and most studies point to behavioral lifestyle factors as a primary cause. In 2019, the college enrollment rate for emerging adults in America was 41%. Thus, the college environment provides an optimal intervention setting for addressing the long-term health of emerging adults. Previous research has found that college students report low intakes of fruit and vegetables and high intakes of fat and added sugars, which may be due to many campus dining environments offering little support for healthy eating. Most university food retail is operated by a food service contract company (e.g., Chartwells). Contractors provide a wide variety of food services to a university, including dining halls, national brand quick-service restaurants, and catering. To our knowledge, there has been limited research examining the extent to which the food services provided in the university environment meet students' nutritional needs. Publicly available university food service contracts can provide valuable information about university healthy food policies. **Methods:** This exploratory research brief evaluated the food service contracts from 14 North Carolina public universities using the 35-item North Carolina Food Service Policy Guidelines Assessment. Most of the criteria in this assessment are from the CDC Food Service Guidelines for Federal Facilities document, with the addition of three categories unique to North Carolina. The assessment has four categories: Beverages, Packaged Snacks, Prepared Foods, and Other. Additionally, we requested feedback from each university’s food service leadership team to confirm our findings. **Results:** Thirteen of the 35 North Carolina Food Service Policy Guidelines were incorporated into at least one university contract. The median number of guidelines per contract was four. The most frequently observed guideline was ‘protein foods from plants such as legumes, nuts, seeds, and soy products.’ No Packaged Snack guidelines were incorporated into any contracts. Of the 14 contracts evaluated, only six contained some nutritional standards for food offerings.
on campus. Seven of the 14 universities (50%) responded to our inquiry regarding the accuracy of the food service contract analysis. Of the seven responses received, two schools did not indicate they had any additional policies or practices beyond what we found in their contracts. The other five schools had between 2 to 14 guidelines they followed as a practice that were not written into their contracts. **Implications:** Obtaining public university food service contracts and evaluating them using the North Carolina Food Service Policy Guidelines Assessment is a cost and time-effective method for determining the healthfulness of a university food environment. However, food service contracts may not reflect all aspects of the campus food environment. Therefore, examining a contract is a valuable first step to beginning conversations with students and leaders about ways to make enhancements. Additionally, universities are encouraged to document healthy food policies in their food service contract for future evaluation and improvement efforts.

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### Parental Values Inform Restaurant Ordering Behavior in Children: A Latent Class Analysis

**Presenter:** Jenna Bensko  
**University:** Colorado State University

**Objective:** The objective of this study was to identify latent classes of values-system and compare class-wise differences in ordering behaviors. Latent Class Analysis (LCA) is a powerful tool that can be used to uncover subgroups of individuals with similar characteristics and allows for tailored interventions based on ordering patterns. This approach allows for the classification of subgroups of values classes that can be conceptually thought of as representing the value systems of parents. This allows us to better predict the outcomes for all subsets of a population in an intervention.

**Background:** Climate change is one of the most pressing global public health issues faced today, alongside the national obesity epidemic. Nudging consumer behavior towards more sustainable dietary patterns has the potential to address both of these environmental and human health concerns. Dietary interventions that target the restaurant, rather than the individual, have proven the most effective. This is largely due to the rise in the percent of food eaten away from home and the contribution of restaurant meals to excess calorie intake. Understanding differences in ordering behaviors, based on consumer values, would help shape restaurant interventions to address the whole population.

**Methods:** A convenience sample of 1481 parents was recruited in order to gain a nationally representative sample and survey data was collected from November 2020 through February 2021 via CloudResearch. A set of questions around parents’ values were assessed to understand the factors that may inform consumer ordering behavior. The questions covered the topics of food safety, locality of business, ease of getting to the restaurant, speed of restaurant service, cost of food, taste of food, time required to cook at home, and food preparation.

**Results:** A total of nine questions were included and responses to these values questions were used to place individuals into subgroups. The best-fitting model contained four latent classes representing four different values-systems. Classes included “Convenience Consumers”, “Entertainment Consumers”, “High-Value Consumers”, and “Low Value Consumers”. We plan to evaluate differences in ordering behaviors for each of these classes.

**Implications:** This exploratory approach has the potential to inform future restaurant
interventions by leveraging the individual differences in value-systems which may influence ordering behavior. Policies and interventions that shift consumer behavior toward sustainable eating styles are needed to address the declining health of the environment and rising obesity rates.

### 5 Qualitative Impact on TV and Social Media Advertising of Unhealthy Foods in Children

**Presenter:** Jennifer Carroll  
**University:** University of Massachusetts

**Objective/Background:** A recent systematic review that examined food advertising influences on children’s attitudes, preferences and intake of unhealthy foods concluded that there is a lack of: 1) qualitative research; 2) understanding of newer media food ads (e.g., social media, pop-up ads); and 3) understanding of long-term health effects of food marketing (1). The WHO supports qualitative research to understand individual experience to inform intervention design and policies (2). Thus, we conducted a qualitative case study of 30 children (9-11 years), designed to understand the extent to which children understand being a target for unhealthy food marketing across digital media platforms. The goals of the study were to qualitatively describe: 1) the extent to which children (9-11 years) realize they are targets for unhealthy, processed foods; 2) if there were racial and ethnic differences in perception of being targeted; and 3) explore if BMI partially mediates (3) perception of being targeted for food ads.  

**Methods:** We collected data from 21 child-parent dyads (with 9 pending interviews) who resided in New Hampshire, Massachusetts, and Vermont from March 2022 to August 2022, to fill this gap. Children were interviewed (audio/video recorded) through Zoom and were asked about their media use, food advertisements they recalled seeing on different media devices, how they interact with ‘skip ad’ buttons (e.g., YouTube), and were asked to share a screenshot of an unhealthy food advertisement seen after the interview. Parents completed a survey for digital devices in the home, weekly time on the digital devices, and background demographics. Interviews were transcribed and themes were identified using NVivo (V20.6.1).  

**Results:** The findings of this proposal are on-going as a chapter in a dissertation.  

**Implications:** In conclusion, this study helps us to learn about current media use, perceptions of targeted ads, and may help inform interventions that can potentially improve children’s health.

### 6 SNAP Online Grocery Delivery in California: Access Gaps During the COVID-19 Pandemic

**Presenter:** Charlie Hoffs  
**University:** Stanford University

**Objective:** My research team and I sought to understand which communities were and were not able to order fresh (perishable) groceries online using SNAP EBT during the COVID-19 pandemic (https://doi.org/10.1016/j.healthplace.2022.102811). In particular, we wanted to understand if urban and rural areas had different levels of access to the program, and to what extent it reached low-income, low-access (“LILA” also known as “food desert” or “food apartheid”) areas. We analyzed access in California because the state includes 10% of US SNAP participants, and SNAP grocery delivery coverage data was more available than other...
Background: During the COVID-19 pandemic, the SNAP Online Purchasing Pilot (OPP) rapidly expanded across the US, allowing SNAP participants to purchase groceries online for curbside pick-up or delivery. SNAP OPP had the potential to increase access to nutritious, safe, affordable food for elderly Americans, veterans, people with disabilities, and people living in rural areas. It can also mitigate inequities in low-income areas with low access to grocery stores. If expanded to support diverse retailers nationwide, the program can potentially support small and rural grocers, food cooperatives, farm stalls, and farmers markets and increase competition in grocery retail. However, limited data and research on SNAP OPP hinders the development of evidence-based program improvements. In particular, identifying which areas can and cannot access delivery could help the USDA identify and address demographic and regional disparities in access. Methods: We analyzed SNAP participants’ access to SNAP OPP from fall 2020 to early winter 2021 in California. We used chi-squared tests for descriptive analysis and OLS linear regressions to assess associations between SNAP OPP coverage and COVID case rates and limited food access areas. We analyzed Amazon, Walmart, and ALDI delivery availability because these were the only SNAP OPP retailers in CA during our study period. We measured the percentage of SNAP participants within the grocery delivery region of a SNAP OPP retailer at the county- and zipcode-level. Results: SNAP OPP reached 86% of California SNAP households in 2020–21. Still, 1/5 of those with access could only use one of the three retailers. Nearly half (47%) of all CA SNAP participants lived in LILA areas. 28% of all urban census tracts, and 40% of all rural census tracts, were classified as LILA areas. SNAP online delivery reached 87% of SNAP households living in urban LILA areas, but only 30% of SNAP households in rural LILA areas. Implications: There are urgent rural/urban disparities in access to SNAP online grocery shopping in California. Rural areas, which were more likely to be LILA areas, had limited access to SNAP grocery delivery. This does not account for disparities in technology access. 26% of Americans living in rural areas and 32% of those living in Tribal areas do not have high-speed Internet (known as “broadband”) (Federal Communications Committee). Policymakers can address these disparities in California and nationwide by rapidly onboarding new retailers into the SNAP OPP, particularly rural grocers; investing in innovative delivery and distribution pilots; and supporting rural technology access and digital literacy initiatives.

The Supplemental Nutrition Assistance Program (SNAP) and Churn: Who is Most Likely to Churn, Why, and Evidence-based Strategies to Prevent Churn

Presenter: Bailey Moore
University: The George Washington University

Objective: This narrative review summarizes available evidence about administrative churn – or frequent entry and exit – in the Supplemental Nutrition Assistance Program (SNAP) by examining characteristics of households receiving SNAP benefits that are most likely to experience churn and evidence-based strategies to address churn in SNAP. Background: Administrative churn in the SNAP program is costly both to the agency processing the case and the SNAP household that loses their benefits. During the COVID-19 pandemic, many states and the District of Columbia took advantage of waivers granted by the US Department of Agriculture (USDA) to relax requirements related to SNAP recertification (e.g., extended certification periods, waiving face-to-face interview requirements). As recertification requirements are being reinstated, there is a risk of churn rates rising. Therefore, there is a
need to identify both which households are at highest risk of churn in order to target efforts to prevent churn and which strategies to prevent churn are well-supported by evidence. 

**Methods:** A narrative overview of the literature synthesizing the findings of literature retrieved from searches of computerized databases. **Results:** Based on the literature households more likely to experience churn include those with more members, with neither elderly, disabled, nor child members, and with case heads who are younger (under age 29) and non-Hispanic Black. Households experiencing changes in composition (i.e., increases or decreases in household size), employment, earnings, and address are also more likely to churn. Income also plays a role: households with income above 100 percent of the federal poverty level and households with no earned or unearned income were more likely to experience churn. There is some evidence that text message reminders are an effective strategy to prevent churn. There is limited evidence on other strategies to prevent churn. Recommendations gathered through interviews with frontline experts provide insight into additional promising strategies that could be tested. **Implications:** States can use these results to pinpoint who is most at risk for churn and implement evidence-based strategies to reduce churn.