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It is my pleasure to present to you the 2021 Journal of NEAFCS (JNEAFCS). This peer-reviewed and research-based journal is among our member benefits. The Journal is one way for our members to inform others in our field and related fields, about the scholarly work of Family and Consumer Science professionals. The Journal highlights research, best practices, and implications for Extension Family and Consumer Sciences. The Journal serves as a great tool to help you stay current with programming, research, and methodology that is specific to our learning and teaching environment.

As you read the 16th volume of the JNEAFCS, I know you will be impressed with the informative and thought provoking information found in each article. Consider your own body of work and what you have to share with your colleagues about the impacts of your programming. Make one of your professional goals to submit an article for a future Journal.

JNEAFCS, an online resource, can be shared as a link with a personal note to your administrators, local and state policymakers, advisory groups, and peers. By sharing our Journal, you can help connect our efforts to the amazing impact we have across the nation. One such example is reduction of health care costs through our nutrition and health education programs. Extension work makes a difference! No one tells our story better than we do.

Thank you to co-editors Dana Wright of West Virginia University Extension, Ashley Dixon of University of Arizona Cooperative Extension, and Rebecca Hardeman of University of Georgia Cooperative Extension for their dedication and hard work in creating an awesome Journal. My appreciation to the members of the Journal committee, peer reviewers, and to our Vice President for Member Resources, Michelle Wright of Texas A&M AgriLife Extension Service. Because of them, we have a quality, peer-reviewed professional publication that helps preserve our research and resources for the future.
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Thank you so much to all of our reviewers for their time, effort, and contribution. Not all reviewers identified themselves on the review form. If your name is not on our list, we would like to sincerely thank you for your contribution and hard work in reviewing these articles.
Another difficult COVID-19 year of highs and lows has passed! While there has been great loss for many individuals, 2021 has also presented an opportunity for innovation, change, and harnessing patience. With this in mind, we present your 2021 edition of the Journal of National Extension Association of Family and Consumer Sciences (JNEAFCS). We appreciate the opportunity granted to us to edit the journal this year and continue to grow and learn throughout the process. Moving forward, please consider submitting a manuscript for the 2022 edition of JNEAFCS to share your voice, spread best practices, contribute to innovation, demonstrate impact, or publicize programmatic findings to your colleagues nationally. The submission deadline is April 15, 2022. Finally, our hearts go out to everyone that has suffered a loss in the past year, and to all that have been negatively impacted by the trials endured because of the COVID-19 pandemic. Our thoughts are with you all.

The articles in the journal of NEAFCS are divided into three categories.

These categories are:

Research

Implications for Extension

Best Practices

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Preventing Financial Exploitation of Older Adults in South Dakota by Family Members: A Qualitative Pilot Study Exploring the Role of Financial Powers of Attorney

Financial exploitation of older adults (FEOA) by family member power of attorney (POA) agents is a problem with few available prevention strategies. With the aging population of rural states, including South Dakota, exploring what happens in families in which a family member POA agent is appointed to manage an older adult’s finances is critical to developing FEOA prevention strategies. In this pilot study, six participants were interviewed. Interpretive content analysis was used to identify preliminary themes of Trust in Relevant Professionals and Positive Family Relationships.
Financial powers of attorney (POA) are used in estate planning; older adults often appoint a relative to the POA agent role (Betz-Hamilton & Vincenti, 2018). A POA agent has the authority to act as another person when he/she does not have the capacity manage his/her affairs and is expected to be a fiduciary (Dalton & Langdon, 2016). 

A fiduciary manages the financial affairs of another in that person’s best interest (Consumer Financial Protection Bureau, 2013). Unfortunately, POA agents have limited oversight by third parties, leaving an opportunity for them to overstep their authority and engage in FEOA (Betz-Hamilton & Vincenti, 2018).

In 2020, South Dakota adopted the Uniform Power of Attorney Act (UPOAA) (South Dakota Senate Bill 148, 2020). The Act consists of four Articles: Article 1 contains general provisions for the creation and use of a POA, Article 2 provides definitions for various types of authority as well as rules pertaining to certain grants of authority, Article 3 consists of a sample POA form and agent certification form, and Article 4 provides miscellaneous provisions of the Act to other laws and pre-existing powers of attorney (Whitton, 2007). 

Adoption of the UPOAA in South Dakota closed a loophole which allowed for the insertion of a clause into the POA document stating agents were not responsible for violations of the terms of the POA agreement and imposed limits on POA agent compensation (Miller, 2018).

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Much of the focus on estate planning in the rural United States has been on the succession planning of farmers and their families. In Minnesota, many farm families do not have a succession plan or personal estate plan, in part due to the older
This pilot study used a qualitative design, which enabled a detailed understanding of what happens in rural families in which a family member financial POA agent is appointed through conducting participant interviews (Creswell & Poth, 2018). After receiving IRB approval, participants were recruited by sharing study information with community groups and a gerontology Extension specialist. Inclusion criteria were being 18 years or age or older, a resident of South Dakota, and having served as a POA agent for a relative aged 60 or older or being an older adult aged 60 or older who appointed a family member POA agent. The age of 60 reflects the Centers for Disease Control and Prevention (2019) definition of an older adult.

Six participants were recruited; all were White. Three were women and three were men. All were in separate POA relationships. Four of the relationships ranged from 2-10 years and two were of an unknown duration. In four of the relationships, the older adults were still sufficiently in control of their affairs. All three women served as a family-member POA agent and all three men appointed a family member POA agent. Recruiting two gendered subgroups was not intentional and somewhat contrary to previous research on FEOA by a family member POA agent, as POA agent selection can be based on gender biases that are preferential to males (Teaster, Vincenti, Betz-Hamilton, & Bolkan, 2019). More details about the participants are provided in Table 1.

Limited research has focused on identifying risk and protective factors associated with FEOA by family member POA agents. Steinman, et al. (2017) focused on identifying risk and protective factors for FEOA by family member POA agents and found both cognitive and physical health declines and a history of poor financial management by the older adult to be risk factors. Positive family relationships and regular communication with family members were identified as protective factors.

**OBJECTIVE**

The objective of this study was to explore the research question, “What are the common lived experiences in rural families in which a family member was appointed as a financial POA agent for an older adult relative?”

Participants engaged in a semi-structured interview and received a $30 gift card after its completion. Each participant was asked if he/she was willing to be contacted after completion of the interview to clarify and expand upon any data, which was completed either in person or via phone. Interviews ranged from approximately 25-60 minutes. Many initial interview questions focused on elucidating information about family interactions, such as “Tell me about the
interactions the elder had with the POA agent prior to
the implementation of the POA” and “Tell me about the
interactions the elder had with the POA agent after the
implementation of the POA”. All interviews were
conducted by the same researcher.

Five participants were interviewed in person and one
was interviewed via telephone due to their distance
from the researcher. Interviews were audio recorded
and transcribed. One researcher began the data
analysis process by reading each transcript multiple
times to become familiar with each participant’s story.
During the reading of each initial interview transcript,
questions were developed, which were asked of each
participant after the initial interview. Once all interviews
were completed and transcribed, the researcher and an
additional researcher read the transcripts for each
participant. Then, the researchers engaged in open
coding independent from one another, in which codes
relevant to the research question were noted in the
margins of the transcripts. After open coding was
completed, focused coding was conducted to identify
categories and themes. All coding was done by hand.
After each researcher completed coding, they
convened to discuss their interpretations of the data
and how they developed codes, categories, and
themes. These discussions continued between the
researchers until consensus was achieved, which is
a means of researcher triangulation (Hawkins & Zuiker,
2019). One researcher discussed the emerging findings
from this study with a gerontology expert to obtain
additional input, which is consistent with peer review
and debriefing (Glesne, 2016). Engaging in researcher
triangulation and peer review and debriefing adds to
the trustworthiness of the findings.

**FINDINGS**

Two preliminary themes were present in this data:
Trust in Relevant Professionals and Positive Family
Relationships. A discussion of each follows.

**TRUST IN RELEVANT PROFESSIONALS**

Four participants expressed having trust in relevant
professionals was central to their experience with or as
a family member POA agent. Relevant professionals
included attorneys, financial planners, tax professionals,
and senior companions. Izzy and Darwin developed
trust with their attorneys in part due to the relationships
the older adult who appointed them as POA agent had
already built with them. Darwin, who served as a POA
agent for his mother-in-law, worked with the same legal
firm as his mother-in-law: “The in-laws had worked with
[this legal firm] for many years. My mother-in-law’s
parents had also worked with them. And since then, we
still work with the same firm on some issues”.

Izzy’s mother wanted her “to have met [her] attorney. It
was helpful because [Izzy had] to call him a couple of
weeks ago. It’s nice talking to somebody who isn’t a
complete stranger.” Izzy’s mother established
relationships with an attorney and financial planning
firm prior to appointing Izzy as a POA agent and “has
stayed with them”. Izzy has “spent time with these
financial planners and [has] met them and [knows]
them. They know [her] on a name basis.” She “[thinks]
that really has helped, that [she’s] not a stranger to
them...they know that [she’s] speaking for [her mother]
but yet [her mother] has given her approval for this”.

Darwin described the trust he had in his mother-in-law’s
tax preparer, who assisted him: “The fellow that did her
taxes for [several] years is a certified accountant and
former IRS agent. [He was] very knowledgeable about
the proper way of doing things...[he] helped us...”

Darwin and Izzy developed trust with relevant
professionals the older adults who appointed them as
POA agent trusted. The relationships the older adults
had with these professionals was long-term; this was
not the case in Scarlett's family. Scarlett was a POA
agent for her aunt, who had a senior companion. The
senior companion had

...come in once a week or every other week and would help
her pay bills or take her shopping.[She] was the one who
called and said it would be a good idea to [get the POA in
place] before she gets any older and is still clear-headed.

Scarlett's aunt did not have a long-term relationship
established with the senior companion; however,
Scarlett began to trust her “because then she would call
me if there was something that—she’d left the cigarette
burning in the ashtray and forgot about it. Just the
things that you'd be on the lookout for”.

In these families, trust in relevant professionals was
present, along with positive family relationships. These
families often had trusting relationships, regular,
positive interactions, and healthy conflict management,
which comprise the following theme, Positive Family
Relationships.
POSITIVE FAMILY RELATIONSHIPS

Lilly, who served as a POA agent for both of her parents, “had a really strong trust relationship [with them]. They weren't worried about me taking their money. I wasn’t worried about them taking advantage of my time. It worked out really well”.

Scarlett’s aunt was distrustful of a niece because she suspected her niece kept money from her sister’s estate that should have been hers; however, “she trusted [Scarlett], and that was good”. This trust was built, in part, due to Scarlett's aunt “never [learning] to drive” and receiving assistance from Scarlett and her husband. Scarlett said:

“When there would be my other aunt’s birthday party at the nursing home, we would go pick her up, so there started to be a bit more of that. Then I told her that I was available to take her to medical appointments. She wanted a cat, so I got her a cat.”

Lilly “had a close family” and interacted with her parents regularly: “[By the time I was appointed as POA agent for my parents], I was the only one [of my siblings] with children, so that’s Grandma and Grandpa, too. So we had a lot more ties with them [than my brothers]”.

Charlie, an older adult who appointed a family member POA agent, had a wife who “is a good listener when it comes to [family] business…she listens very carefully to what I say and what the boys say, what seems relevant and so forth”. Charlie’s children “can be independent minded as to what ball games they follow. But when it comes to business, when it comes to family, they basically come together”, suggesting that Charlie, his wife, and his children regularly and positively interact, and put the needs of the family above their individual needs. Charlie noted these interactions do not always result in happiness: “We’re certainly not one happy clan, in the sense that there’s a lot of things that we will disagree on. But [as far as the POA] is concerned, we have no problem”. This suggests that Charlie's family can handle conflict effectively.

The family member POA agents engaged with the same professionals as the older adults due to the trust that had been built between the older adults and professionals. This facilitated trust with the family member POA agents. Senior companions were also considered to be trusted professionals. Moreover, the older adults and family-member POA agents in this study experienced positive family relationships characterized by trust, regular, positive interactions, and healthy conflict management.

Prevention of FEOA by family member POA agents has not received as much empirical attention as the identification of risk factors for such exploitation. Ries (2019) found a lack of planning for financial decision-making is a risk factor. None of the participants in this pilot study indicated FEOA had occurred and all the older adults actively engaged in planning for financial decision-making with relevant professionals such as attorneys and financial planners, suggesting this advanced planning may protect an older adult from becoming a victim of FEOA by a family member POA agent. Moreover, these professionals should be open developing trusting relationships with family member POA agents. Extension programming that incorporates involvement from such professionals can help facilitate the development of these relationships.

The preliminary finding of positive family relationships was consistent with Steinman, et al. (2017), who identified positive family relationships as a protective factor for FEOA by a family member POA agent. Extension programming focused on developing positive family relationships, such as the Strengthening Families Program, could have an unintended benefit of helping reduce later FEOA by a family member POA agent (Iowa State University, n. d.).

This study has several limitations. Biases and assumptions were likely present in participants’ responses, as their experiences were perceived to be non-exploitative but may not have been as perpetrators typically do not self-identify. Moreover, the sample lacked diversity. Participants were residents of a rural state which has many tribal nations, yet no residents of tribal nations were recruited. All participants were White. Moreover, all participants were recruited via contacts one researcher had with Cooperative Extension and community groups, which limited recruitment to individuals who had access to these resources. Not all interviews were conducted in person, so some participants’ non-verbal reactions to questions could not be observed and further probed.
Envision the skills that allow people to calm down, make friends, positively participate in community, and make fair, safe choices. Called social and emotional learning (SEL), these skills represent the way people recognize and manage personal responses that impact interpersonal interactions and long-term individual success. Recognizing the need for resources teaching SEL skills to families, two Wisconsin state institutions partnered to create a free e-resource for families called Raising Caring Kids. Post-program statewide results show increased parental knowledge about SEL concepts, greater confidence in teaching SEL skills to children, and the intention to try new behaviors related to SEL.
Social and emotional learning (SEL) skills help children calm down when upset, make (and keep) friends, positively participate in community, and make fair and safe choices. These skills are key to establishing and maintaining relationships as well as managing emotions over a lifetime, support lifelong learning, and creating positive self-identity (Payton et al., 2000). Research points to the crucial role SEL skills play in ensuring school success, decreasing conduct problems, and developing a more positive sense of self (Bierman et al., 2008; Howse et al., 2003; McClelland et al., 2007). While much focus has been given to the value of teaching SEL in school settings (Taylor et al., 2007), family is where children first learn emotional skills (Fredericks et al., 2016). When adults model positive emotional skills, children become competent in those same skills (Bierman, Morris, & Abenavoli, 2017). SEL knowledge and practice increase children's abilities to make positive behavior choices now and, in the future (Hawkins et al., 2008; Jones et al., 2015). The value of supporting parents as SEL role models is clear and a wide variety of methods from in person classes to school family partnerships have been used to teach parents' SEL skills (Fredericks et al., 2016).

Research also shows that parenting education and support can be successfully offered through digital, asynchronous resources. For instance, online resources and e-newsletters have been linked to increased parental knowledge and behavior changes (Clarkson & Zierl, 2019; Vilches et al., 2020). Furthermore, the COVID-19 global pandemic illustrated the need for effective, digital resources to support families and parents. However, few resources have explored SEL resources for parents in an asynchronous online format. The teaching of SEL skills using digital resources represents a unique opportunity for positive family engagement.

**OBJECTIVE**

The aim of this study was to measure the efficacy of a no-cost, digitally delivered social-emotional learning (SEL) resource for parents and caregivers of elementary-age children (K-5). The three main objectives were to:

- increase parents' knowledge about social-emotional development,
- increase parents' confidence in teaching SEL skills to their children, and
- change parental behavior as a result of trying new SEL skills.

**METHOD**

**PROGRAM DESCRIPTION**

A team from UW–Madison Extension developed a digital SEL program for parents called Raising Caring Kids (RCK). RCK equips parents and caregivers of elementary-age children (K-5) with tools and resources to develop and foster SEL skills while nurturing positive parent-child relationships. These materials were based on WI Department of Public Instruction's (DPI) SEL competencies list, which draws upon the national Collaborative for Academic, Social, and Emotional Learning competencies (CASEL 2021).

The RCK Program uses a multi-pronged approach for reaching
parents with diverse learning styles and abilities and is available in English and Spanish. Sixteen articles (see Figure 1) written in plain “everyday” language form the core content of RCK (Berg et al., 2021). RCK was designed for schools to send one article per week for sixteen weeks via the school’s email system. Each article links to one of the following SEL competencies: personal emotions, empathy, positive self-identity, lifelong learner, respect others, social skills, responsible choices, and civic responsibility. Each article follows the format of 1) introducing a parenting challenge and article objectives, 2) sharing basic research on the article objective, 3) suggesting a related skill that parents can practice with their children, and 4) an additional resource, tip, or skill for families to try. Five short videos were also developed to further explain SEL concepts and were embedded in five of the articles. These videos ranged from one to four-minutes long illustrating the skills of problem solving, mindfulness, persistence, perspective taking, and responsibility.

RECRUITMENT
RCK was promoted through a variety of channels throughout Wisconsin including flyers, social media posts, listservs, conference presentation, and word of mouth by colleagues at both UW-Madison-Extension and WI DPI. RCK establishes a way for schools and other community partners to authentically partner with families to promote SEL skills at home. School administrators, counselors or other professionals could sign up to receive instructions for delivering the email series to parents of elementary-age children. From October 2018 to October 2019, 511 school administrators, teachers, and other professionals registered to receive information on how to deliver RCK.

PROGRAM EVALUATION
Data about RCK was collected through 1) a parent self-report questionnaire, and 2) phone interviews with school personnel connected to the project. This research project did not meet the federal definition of human subjects’ research according to UW Madison senior IRB analyst. Short link URLs included in each email to parents were also used to collect click-through rates and show that an average of 459 individuals clicked on the emailed link each week to access the full content. Parents clicked a survey link embedded in the final four RCK emails to provide feedback on a self-report questionnaire. The questionnaire included items about SEL tips parents learned, parents’ perceived confidence in teaching SEL before and after RCK and plans for applying SEL skills. Ninety-one (19.8%) of parents responded to the survey, based on the average number of parents accessing each article via the short URL and the total parents who completed the online questionnaire. Additionally, 15 elementary school staff from one participating school gave feedback during short phone interviews on RCK and any changes they noticed in SEL in their classroom after distributing RCK. Staff interviews and open-ended parent questions were analyzed and coded using the social emotional competencies framework.

RESULTS
NEW KNOWLEDGE OF SEL SKILLS
RCK participants reported new knowledge related to SEL skills. More than a third of participants (n=37) mentioned at least one tip/idea that they learned from RCK. The tips and ideas that parents described learning mapped onto the eight SEL competencies at the core of RCK (see Table 1). For instance, one parent shared they learned “how to ask how the child feels instead of telling them what to feel,” which links to several SEL competencies such as personal emotions, empathy, respect others, and social skills. Another parent shared about teaching respect for others, social skills, and empathy while watching a show by “Pointing out faces or expressions on characters in a movie, pausing the movie and having a quick conversation about how or what they might be feeling or what we think they should.” Another parent described a growth mindset and the competency of lifelong learning in the takeaway of “asking my child how to solve a problem instead of telling her.” Many parents reported learning (or remembering) the value of patience and calm in communicating with their children. Although RCK includes two articles for each core competency, the skills most mentioned related to emotional knowledge and interpersonal skills. Several core competencies were mentioned simultaneously by participants. Social skills were mentioned most frequently with both personal emotions and empathy. Respect others was mentioned along with empathy and social skills.

Most teachers shared that social-emotional learning was an important topic and RCK content met a definite need for families. One teacher agreed that the program was a valuable source of knowledge for parents “…because it’s just one more little piece of the social and emotional education that we don’t really have in our building or district. Even the little blurbs in the email gave parents an idea of what they could try.”
INCREASED PARENTAL CONFIDENCE IN TEACHING SEL SKILLS
Parents were asked to report their confidence in teaching social and emotional skills to their children before and after participation in the program. Results showed they felt significantly more confident in teaching SEL skills after receiving RCK. Specifically, the proportion of those with a high confidence level more than doubled from 25.0% to 54.7% (Figure 2). One parent specifically highlighted the five videos created for RCK as a useful tool for teaching social-emotional skills to their children, saying, “The video resources worked well as conversation starters.”

CHANGING BEHAVIOR BY TRYING NEW IDEAS
Respondents were asked to share a tip they learned from RCK that they intended to practice with their children illustrating the types of behavior changes that might be observed. Seventy percent (n= 63) of the parents reported having tried a new parenting idea from RCK and among these parents, 85% (n=54) shared they had tried one to four ideas, and 15% (n=9) tried five or more new ideas. One respondent recalled a specific activity from RCK: “make a game of using face to describe emotion, naming emotions.” A parent also illustrated the value of modeling skills for their children: “We make sure we pay more attention to the behavior we model for our kids and make sure we take more time for learning opportunities.”

Tips that respondents said they would integrate into their daily parenting life addressed all eight core SEL competencies taught in the RCK articles. Parents were most likely to mention adding the competency of social skills (n=16) to their parent-child interactions, followed by personal emotions (n=9). Some parents shared examples that integrated multiple SEL competencies. For instance, one respondent said, “We read books showing how the characters reached goals and speak to our kids about solutions to reach their goals,” representing both lifelong learner and positive self-identity competencies.

About a quarter of respondents (n=22) reported being highly confident in SEL prior to the program. These parents still reported learning and behavior changes due to RCK or mentioned that the program provided good reminders. For example, one parent said that they already “pay attention to their needs and spend time to improve the relationship with them,” but learned that “you can understand a child’s feelings by looking at their faces,” and plans to do more listening. Another parent already talks with their child about accepting others but learned the “importance of helping kids make decisions.”

Behavior change was also noted through teacher evaluations, bolstering the premise that schools and families can successfully work together to teach children SEL skills. Two teachers shared examples of behavior change they noticed in their classroom over the course of the program. One teacher found her students grew in their ability to handle emotions: "I could tell kids got more aware of feelings. We spent a lot of time talking about emotions and recognizing and handling their feelings. Just talking about it more I've seen a difference in how kids handle their emotions." Another teacher shared a story of a specific child whose father actively engaged in applying the skills shared in RCK:

“I did see [behavior change]. I had one student who was really struggling with recess behaviors and not being the most kind. I know his parent was one of the parents who kept responding, "thank you, thank you." And I just noticed after ... we started emailing those out he just seemed to be more caring. We had less recess issues from him. And I do think it’s because his dad especially was trying to implement them at home.”

PROGRAM ADAPTATIONS
RCK is showing promise as the foundational content in several other UW Madison Extension programs using different delivery methods. For example, the RCK content has been adapted to be shared via social media video. Short 3- to 5-minute videos have been created based on the RCK content and posted on the state extension Facebook page. These same videos have been downloaded onto tablets for incarcerated parents to view. RCK also formed the basis for a series of virtual Parent Cafés held on Zoom that were created to decrease parents’ isolation during the COVID-19 pandemic and safer at home mandates while teaching parents skills to support their children’s SEL skills.

LIMITATIONS
Although the study's sample size was a limitation, the team hypothesizes repeated efforts would yield similar results. Because of the recruitment method, we were able to document the number of schools requesting RKC materials but not the actual number of schools that implemented the program. Future plans include better tracking of schools delivering the program and the number of parents reached by each school.
SUMMARY

In conclusion, parents, children, and schools benefit when SEL skills are practiced and modeled. The mechanisms through which we teach SEL skills do not need to be complicated. Frequent, emailed skill reminders boosted parent confidence and encouraged intentional SEL skill practice with children. Preliminary research with teachers also suggests that these emailed SEL resources not only increased parents’ SEL teaching but also inspired teachers to include SEL content in their daily interactions with children.

RCK is a simple yet promising resource that has the potential to reduce emotional distress and promote positive social emotional behaviors. With content strongly rooted in a national SEL framework, (Blyth, D., Jones, S., & Borowski, T. 2018) the RCK materials can be used to pivot and reach parents through a wide variety of delivery methods. Children first learn about emotions and social skills in their family. RCK gives families the tools to be confident in how they teach SEL.

You may click here to access the references, tables, and graphs for this article.

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The stellar RCK team members could all be listed as co-authors on this paper: Brook Berg, Margaret Kerr, & Jenna Klink. Many thanks also to the county and state colleagues and partners who promoted RCK throughout Wisconsin.
Nutrition Extension Educators’ Perceptions of Evidence-based Practice

Excellence in nutrition education demands a strong base in research evidence. This study aimed to evaluate the perceived knowledge, skills, abilities, attitudes, and activities of nutrition extension educators related to evidence-based practice. Family and Consumer Sciences (FCS) extension agents in Florida were surveyed through Qualtrics using an online, modified version of the Evidence-Based Practice Questionnaire (EBPQ). The educators reported positive attitudes and evidence-based practice activities which supported their nutrition knowledge and programming but also noted time constraints. Lower ratings for perceived knowledge, skills and abilities suggest a need for professional development related to evidence-based practice.
The purpose of Extension education is to promote the practical application of research knowledge. As discipline-specific science and educational practices advance, it follows that Extension programming will constantly evolve to reflect new information. Thus, an evidenced-based approach, the “conjunction of research and practice,” is an expectation for all Extension Educators (Dunifon et al., 2004).

The Society of Nutrition Education and Behavior (SNEB) nutrition educator competencies include “aptitude in nutrition education research methods” and specifically to “[a]nalize, evaluate, and interpret nutrition education research and apply it to practice” – a clear expectation that nutrition educators undertake evidence-based practice (Society for Nutrition Education and Behavior, 2021). According to the International Confederation of Dietetic Associations (2010), evidence-based practice “is about asking questions, systematically finding research evidence, and assessing the validity, applicability and importance of that evidence.” For those nutrition educators who are dietitians, the Code of Ethics of the Academy of Nutrition and Dietetics emphasizes an evidence-based approach and practice decisions (Academy of Nutrition and Dietetics, 2018). As the SNEB competencies highlight, nutrition educators also must apply research evidence (Society for Nutrition Education and Behavior, 2021).

While evidence-based practice is recognized as essential to ensure that nutrition education programming is based on current research, the extent to which nutrition educators exhibit such practice is not known. Byham-Gray et al. (2005) reported that only a minority of practicing dietitians surveyed in the United States (U.S.) had the knowledge and skills for evidence-based practice. Nonetheless, in recent years, there has been an upsurge of nutrition practice guidelines (Raynor et al., 2020), evidence analysis (Academy of Nutrition and Dietetics, n.d.), and systems that provide evidence-based answers to nutrition questions (Dietitians of Canada, n.d.). Thus, the expectation is that nutrition education based on evidence is now the norm. However, in a recent pilot study, dietetic interns undertaking supervised practice to become registered dietitians/nutritionists, reported significant barriers to evidence-based practice with their preceptors, and only 72% of the respondents in the convenience sample agreed with the statement, “I intend to incorporate evidence-based practice in my future job” (Hinrichs, 2018). No known research has explored evidence-based practice of nutrition Extension Educators. In an era of rampant nutrition misinformation (Wang et al., 2019), it is critical that nutrition educators deliver educational programming based on current research evidence.

**OBJECTIVES**

This study aimed to evaluate perceived knowledge, skills, abilities, attitudes, and activities related to evidence-based practice of Family and Consumer Sciences (FCS) Extension Agents delivering nutrition education programming. Specifically, the objectives were to evaluate their evidence-based practice effort activities, attitudes towards evidence-based practice, and perceived knowledge, skills and abilities related to evidence-based practice. An additional objective was to query their preferred sources of evidence-based nutrition information.

**Wendy J. Dahl, PhD, RD and Alison O’Donoughue, MS**

**RESEARCH**

The purpose of Extension education is to promote the practical application of research knowledge. As discipline-specific science and educational practices advance, it follows that Extension programming will constantly evolve to reflect new information. Thus, an evidenced-based approach, the “conjunction of research and practice,” is an expectation for all Extension Educators (Dunifon et al., 2004).

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DID YOU KNOW?

FCS Extension Educators in Florida, who were currently delivering nutrition education, were recruited in September 2020. An invitation to participate with a link to the Qualtrics® survey was sent through the University of Florida’s Extension administration listserv to an estimated 62 Extension Educators currently involved in nutrition education activities. Two e-mail reminders were sent to encourage survey response. The anonymous survey included the previously validated Evidence-Based Practice Questionnaire (EBPQ) (Upton et al., 2014). The EBPQ was modified, such as by replacing “clinical practice” with “nutrition Extension education.” Likert scales were used to assess: 1) evidenced-based practice activities over the past year (1=never to 7=frequently); 2) attitudes towards evidence-based practice (1=very negative to 7=very positive statements); and 3) knowledge, skills and abilities related to evidence-based practice (1=poor to 5=best). Additionally, educators were asked about their preferred sources of evidence-based nutrition information and use of the University of Florida peer-reviewed Extension publications.

The Institutional Review Board at the University of Florida approved the study as exempt. The informed consent language was displayed on Qualtrics® and interested individuals agreed to participate by clicking “agree” prior to completing the survey. Survey outcomes were analyzed by descriptive statistics (mean and standard deviation) and responses to the open-ended questions were summarized.

RESULTS

Of the nutrition educators surveyed, 20 FCS Agents completed the survey. Of respondents, 17 identified as white, two as African American, and one individual chose not to report race; five respondents identified as Hispanic. Three respondents had worked as an Extension Agent for less than 3 years, six for 3–5 years, three for 6–10 years, five for 11–15 years, two for 16–20 years, and one reported working as an agent for more than 21 years. The ages of respondents varied from 25–34 (n=3), 35–44 (n=5), 45–54 (n=7), 55–64 (n=3), and 65–74 years (n=2).

Respondents reported an overall rating of 5.2 ± 1.5 (mean ± SD) for undertaking evidence-based practice effort activities to address gaps in knowledge. Attitudes were rated at 5.7 ± 1.5, and perceived knowledge, skills and abilities averaged 3.6 ± 0.8. Table 1 presents the mean responses to each of the EBPQ items. The item, “shared this information with colleagues,” was ranked the lowest among the nutrition Extension education evidence-based practice efforts in response to a gap in knowledge. Regarding attitudes towards evidence-based practice, item 1 = “My workload is too great to keep up to date with all the new nutrition evidence” to 7 = “New nutrition research is so important I make time in my schedule,” was ranked the lowest at 4.4 ± 1.7 on the scale of 1–7. The question regarding, “converting your information needs into a research question,” was ranked lowest in the knowledge, skills and abilities section (3.0 ± 0.9), whereas “ability to apply information to nutrition extension education efforts” was ranked highest (4.1 ± 0.7).

Sources of evidence-based information included state Extension Specialists, professional organizations (e.g., American Diabetes Association, American Heart Association, Academy of Nutrition and Dietetics, and the Society of Nutrition Education and Behavior), government departments (e.g., U.S. Department of Agriculture), university-approved curriculum and online resources, reputable domain names (e.g., .edu, .org, and .gov), and nutrition journals. Respondents also indicated a frequency of use of the University of Florida’s evidence-based peer-reviewed publications (https://edis.ifas.ufl.edu); 5% (1 respondent) used these publications “rarely or never,” 45% reported “a few times a year”, 40% noted “monthly”, and 5% (1 respondent) indicated a “weekly” use of the publications.

DISCUSSION

The results of the present study suggest that FCS nutrition Extension educators identify knowledge gaps, frequently seek out the relevant research, and integrate the evidence into their nutrition Extension education efforts, thus strengthening their expertise and programming. Given the emphasis on program outcome evaluation, the respondents reported that they often evaluated the outcomes of their nutrition Extension education efforts. However, lower ratings were reported for sharing their new knowledge with colleagues, which may suggest an opportunity for increased involvement in in-service training or conference presentations, particularly if their interpretation of “colleagues” extends beyond their region or state. The item “critically appraised, against set criteria, any literature you have discovered” also was scored lower than the mean for the evidenced-based practice activities. Byham-Gray et al. (2005)
suggested educational activities related to the steps of the evidence-based practice (i.e., formulating questions, searching for and critically evaluating the literature, and application to practice) are needed to promote evidence-based practice. Nutrition Extension educators may need specific training to enhance their skills in critical appraisal of literature to foster the routine application of research findings.

Reported attitudes towards evidenced-based practice were very positive with the exception of the item, “my workload is too great to keep up to date with all the new nutrition evidence” vs. “new nutrition research is so important I make time in my schedule,” which was rated at only 4.4 ± 1.7 on the Likert scale from 1 – 7. This finding suggests that time constraints were an impediment to evidence-based practice for the FCS nutrition Extension educators surveyed. It is well established that Extension educators require professional development (Cummings et al., 2015). FCS educators need current, evidence-based nutrition information, in a synthesized format for efficient learning and ease of application given their time constraints. Synchronous webinar professional development, with an asynchronous option to view archived presentations delivered by content experts, has been shown to enhance knowledge of current nutrition research and foster implementation into nutrition and health Extension programming (England et al., 2020). Additionally, implementing curriculum developed by content experts and evaluating it for effectiveness in specific target groups and geographical regions supports evidence-based programming (Fetsch et al., 2012). Previous research has shown that when compared to 4-H educators, FCS agents were more knowledgeable and demonstrated more positive attitudes towards evidence-based programs (Perkins et al., 2014), supporting the premise that providing FCS Extension educators with appropriate evidence-based curriculum may help to offset the need for the agents to undertake time-consuming, evidence-based practice activities such as critically appraising source literature. Providing evidence-based nutrition curriculum to Extension educators is, perhaps, analogous to the many clinical practice guidelines developed and disseminated to time-crunched health professionals in practice.

The FCS nutrition Extension educators reported overall moderate perceived knowledge, skills and abilities related to evidence-based practice. They rated their “ability to apply information to nutrition extension education efforts” highest in this category at 4.1 ± 0.7 with a rating of 5 being designated as excellent. In previous research, evidenced-based practice knowledge was associated with more years of education and completion of a research course, among other indicators (Byham-Gray et al., 2005). Although these indicators were not queried in the present study, most FCS educators are Masters-trained, with diverse backgrounds that may have included research training. A future study could examine the relationships between knowledge, skills, and abilities related to evidence-based practice and research training.

As expected, FCS nutrition Extension educators drew on a variety of sources of evidence-based information. Strayer et al. (2020) surveyed the sources of information used by health educators and reported that state Extension specialists were preferred information sources. Similarly, in response to an open-ended question in the present study, state Extension specialists were indicated as a source of evidence-based nutrition, as was university-approved Extension curriculum. However, many other sources of evidence-based nutrition information were reported, such as professional journals and government websites, highlighting the resourcefulness of the respondents to ensure their evidence-based nutrition practice. Surprisingly, many FCS agents did not make frequent use of their university’s peer-reviewed Extension publications, although these e-publications address many relevant nutrition topics (https://edis.ifas.ufl.edu) and are generally highly accessed (D. Hagen, personal communication, March 19, 2021).

The goal of all nutrition education is to be evidence-based. The results of this study suggest that continuing education on the knowledge, skills and abilities related to evidence-based practice may be needed to ensure Extension nutrition educators embrace and perhaps champion evidence-based practice. Extension educators’ contributions to the evidence base of nutrition education effectiveness through participation in practice-based research is needed, such as sharing of evaluation findings through conference presentations and publications. As lack of time was noted as the greatest barrier to evidence-based practice, the need for targeted evidence-based nutrition curriculum and the support of nutrition Extension specialists was confirmed. The revised EBQI used in the present study, possibly combined with a tool that queries the implementation of various evidence-based curriculum and resources, may be useful for the evaluation of nutrition Extension educator practice.
Funding: This study was supported by the Department of Food Science and Human Nutrition, University of Florida/Institute of Food and Agricultural Sciences (UF/IFAS).
Focus Groups Inform Disaster Preparedness Resources and Strategies

This article details the findings of a focus group study conducted with disaster survivors, professionals, and volunteers to explore disaster financial preparedness needs. During fall 2018, two Extension Educators led four focus groups to determine the need for additional disaster financial preparedness resources. The twenty-seven participants provided insights on disaster financial issues survivors encounter; financial knowledge, attitudes, skills, and behaviors that support financial resilience; sources of financial information and assistance; identification of current and needed financial preparedness resources; as well as recommendations on what good resources look like and how to make them accessible and utilized.
The need for financial preparedness in times of disaster has been well documented. The National Oceanic and Atmospheric Administration (NOAA) reported that in 2020 there were 22 climate disaster events with losses exceeding $1 billion each across the United States (NOAA, 2021). Being financially prepared for a variety of emergencies is a key factor in being resilient (Castillo, 2018). Larrimore et al. (2018) reported that 4 in 10 adults, when faced with an unexpected expense of $400, would not be able to cover the expense or would need to sell an item or borrow money. The 2019 Federal Emergency Management Agency (FEMA) National Household Survey (2021) indicated that 69% of adults have saved some money for an emergency, but only about half have saved more than $700. Although many organizations have stressed the importance of disaster preparedness, levels of preparedness remain extremely low (Annis et al., 2016). Much of the existing literature focuses on emergency preparedness, with limited discussion of financial preparedness (Perry et al., 2001).

Few disaster financial preparedness resources were identified in a search. The Emergency Financial First Aid Kit (EFFAK; FEMA, 2019) focuses on the organization of financial paperwork (compiling, safeguarding, and updating important papers, and reviewing insurance). The Consumer Financial Protection Bureau’s (CFPB) website highlighted three steps for preparation (CFPB, 2021). A FINRA blog post (2019) discussed financial preparation basics, including developing a preparedness kit, and an inventory of personal belongings. Perry et al. (2001) explain preparedness as having necessary resources in place before a disaster or being able to obtain items as needed. In this review, we identified gaps in resources that assist people to take small preparedness steps and foster resilience.

**OBJECTIVE**

The objective of this study was to determine the need for additional disaster financial preparedness resources. We wanted to learn about current resources, information gaps, and content necessary for individuals to become financially prepared for disasters.

**METHOD**

Focus groups are an appropriate qualitative data collection method as they acknowledge participants as experts in their experiences (Levine & Zimmerman, 1996) and provide interaction with people having similar experiences (Kitzinger, 1995). Stewart and Williams (2012) identified that an online synchronous group allows geographically dispersed people to participate simultaneously. Web conferencing provided the opportunity to invite individuals from across the country, while still providing an environment similar to a traditional, in-person focus group (Tuttas, 2015).

Seven hundred ninety-three disaster professionals, volunteers, and survivors from across the U.S. were invited via email to participate in the
**FINDINGS**

**FINANCIAL ISSUES DISASTER SURVIVORS DEALT WELL WITH**

Focus group participants were asked, “Think back to the last disaster you responded to or that impacted you. What financial issues were survivors better able to deal with and why?” Participants shared that survivors who had **cash on hand** were better able to recover. Those with **adequate insurance**, who understood their coverage, and had a positive relationship with their agent were able to recover more quickly. Participants emphasized that individuals who **organized their important papers and completed a household inventory** before a disaster were better able to traverse the recovery phase. Participants indicated that individuals who were **financially stable** (adequate savings and manageable debt) before a disaster were more resilient, resulting in more recovery options and less stress following a disaster. In addition, participants shared that informed individuals, skilled in identifying and accessing services, navigate the recovery process better.

**CHALLENGING FINANCIAL ISSUES FOR DISASTER SURVIVORS**

Focus group participants were asked to think back to the last disaster they encountered. This time, they were asked, “What financial issues were more challenging for survivors to deal with and why?” Participants indicated that disaster recovery involves a lot of ‘red tape’ so survivors need to be tenacious self-advocates. The remaining themes mirrored responses to the previous question. Participants indicated that individuals with no or inadequate insurance faced more challenges. One participant shared, “Insurance is a complicated issue, and many are underinsured and they don’t even know it.” Individuals who had not organized their important papers (including contact information) were more overwhelmed as they faced challenges replacing documents. Participants emphasized that good communication skills were vital. Participants shared that individuals who lack savings and resources are less resilient, facing greater financial challenges. Also, participants pointed out ‘low-resource communities’ likely face greater housing and food insecurity issues immediately following a disaster.

**FINANCIAL KNOWLEDGE, ATTITUDES AND SKILLS SUPPORT FINANCIAL RESILIENCE**

Focus group participants were asked, “What financial knowledge, attitudes, skills, and behaviors support financial resilience in disaster recovery?” Participants indicated that **financially capable individuals** are more resilient. Financial skills mentioned included budgeting, saving for non-monthly expenses and emergencies, spending less than one earns, assessing risk management, and having adequate insurance. Participants indicated that ‘insurance literacy’ (the ability to understand coverage, assess adequacy, and having a positive relationship with one’s agent) was important. Participants mentioned that possessing positive communication skills and knowing the questions to ask impacted outcomes. Focus group participants also identified that those with **self-advocacy skills** were better able to find and access disaster recovery resources. Possessing decision-making, evaluation, and...
and information-seeking skills, as well as the ability to deal with bureaucracy, were beneficial.

Participants were asked, “Where do people go to get information/assistance on getting their finances in order?” They identified community, nonprofits, social service organizations, community leaders, and local businesses. Friends, places of worship, and social media were identified as personal supports. Participants acknowledged that many people don’t know where to go for help.

**CURRENT FINANCIAL PREPAREDNESS RESOURCES IDENTIFIED**

Participants were asked, “Which resources are currently available to help survivors financially prepare for a disaster?” Participants identified: Cooperative Extension, EDEN, United Way, www.preparemybusiness.org, insurance companies, and United Policyholders. Governmental and non-governmental resources, Red Cross, FEMA, CFPB, Small Business Administration (SBA), www.Ready.gov, and the Internet were also identified as resources.

Many participants agreed that preparedness resources, in general, are lacking or those that are available are not being utilized. Some participants indicated most resources are related to recovery rather than preparedness. Participants stated that many resources are too complicated, only available in print, while others don’t meet low literacy, learning style, and language needs. Finally, when asked which resources were missing, participants identified basic financial education accessible to all, resources that motivate people to prepare, and simple planning tools. One participant pondered how to, “stress the importance of preparedness, [because] preparing itself is a privilege”.

**CHARACTERISTICS OF GOOD RESOURCES**

Participants were asked, “What would ‘good’ resources look like?” and “What delivery formats would allow survivors to be more financially resilient following a disaster?” Participants indicated resources should be simple, visually appealing, provide small action steps, use bullets, and provide checklists. Focus group participants emphasized that good resources should utilize multiple delivery formats and tools. Social media, podcasts, videos, and apps were seen as effective. On-demand online courses and packets with fillable forms were thought to be good while face-to-face disaster preparedness education was not a priority. Participants shared that good resources are accessible for multiple languages and income levels. Good resources offer real-life stories that are relatable and encourage preparedness. Participants discussed that offering incentives to motivate preparedness actions might be beneficial. Finally, participants stressed the need to find people, get their attention, and encourage action.

Participants suggested a matched savings program for low-income people who may find it difficult to set money aside for something that might never happen.

**MAKING RESOURCES ACCESSIBLE AND UTILIZED**

The next question asked, “What do we need to make resources accessible and utilized?” Responses included: timing of resource delivery (building upon existing designated disaster/weather weeks); location of resource delivery (offering resources where people currently receive information, such as laundromats or events like preparedness fairs); diverse delivery strategies (employing multiple formats to reach varied audiences and collaborating across organizations to maximize reach); and incentivizing resource use (offering incentives by financial institutions, insurance companies, or employers to increase preparedness actions).

**DIVERSITY ISSUES RELATED TO PREPAREDNESS**

Focus group participants were asked if there were specific issues of diversity that impact financial preparedness and resilience. One participant acknowledged, “The systems we have in place to help people become financially prepared and responsive have some barriers [related to diversity]”. Participants indicated that one’s socioeconomic status may impact their ability to engage in preparedness activities. Low-income individuals may not have the capability to save for emergencies. In addition, some may have trust issues with agencies that they feel have previously failed them, making them hesitant to consider options.
Participants shared that cultural beliefs may impact preparedness. Some cultures may not prepare as they believe their higher being will protect them. Other cultures forbid talking about bad things, such as disasters. Other cultures limit which family members participate in financial discussions or may simply rely on family for support. Another factor identified was geographic diversity. Rural people might believe they are already prepared and not respond to preparedness tips, while resources available in an urban area may make recovery easier.

**SUMMARY**

Disasters are occurring more frequently and having a greater financial impact on more people. Financial preparation for disaster may be overwhelming, resulting in many individuals being ill-prepared for the financial repercussions of a disaster. Because of these factors, there is a need for financial preparedness education. The focus group participants identified financial preparedness content and strategies to help individuals be more resilient and financially prepared. As data was coded, we found that several themes appeared repeatedly. **Key themes related to financial preparedness content** included: being financially stable and capable (including having adequate savings), having cash on hand, acquiring adequate insurance, being insurance literate, organizing important papers (including a household inventory, contact information, and a ‘grab & go bag’), and having strong communication and self-advocacy skills. **Key themes related to delivery strategies included**: making resources and education accessible to all (multiple delivery methods and tools, appropriate for low-literacy and low-income individuals, appeal to multiple learning styles, available in multiple languages, and acknowledge cultural and geographic differences), and resources should be simple (easy to consume, visually appealing, include bullets, checklists, and small action steps). In addition, to create awareness and education it was suggested to build upon existing designated disaster and weather events, collaborate with other organizations, and reach people where they are at. Participants indicated that motivating people to act may require incentives.

Often, Extension’s role has been in disaster recovery. Black (2012) identified that Extension is uniquely positioned for disaster work and encouraged greater work in emergency preparedness. We assert that Extension should serve as a catalyst for disaster financial preparedness, resulting in personal financial

We developed an infographic (Appendix B), Disaster Financial Preparedness: Start planning today! (Croymans & Hendrickson, 2020) to highlight the strategies identified in the study.

There are certain limitations to the study. The small focus group size and geographic representation from only five states limit the types of disasters experienced, impacting views and perceived needs. Earlier, we discussed non-verbal cues as being more difficult to identify in online focus groups. One strength in the study is the variety of participants involved in the focus groups (disaster survivors, volunteers, and professionals) and the diverse experiences each brought to the discussion.

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You may click here to access the references, tables, and graphs for this article.
An Assessment of Programmatic Gaps in Extension Financial Management Education in Utah

Recent research findings reported Americans were stressed about finances due to COVID-19 and needed financial management education. This study assessed the capacity of county Extension faculty to provide financial management education to clientele by conducting a programmatic needs assessment. Data were gathered from a census of faculty and analyzed using descriptive and non-parametric statistics. Results demonstrate an urgent need for financial education throughout Utah, while also revealing the actual delivery of finance-specific classes is relatively low. A professional development need exists to build competence through education via train-the-trainer opportunities and programmatic support.
Data from a September 2020 survey by the National Endowment for Financial Education (NEFE) showed that 84% of Americans were stressed about finances because of the COVID-19 pandemic, and as a result, more people tapped into savings and investments, deferred bill/debt payments, and took on more credit card debt (NEFE, 2020). With county-level presence throughout Utah, Cooperative Extension sits in a unique position to meet the needs of communities and improve the lives of individuals and families. During and after the COVID-19 pandemic is an opportunistic time to engage in financial management programming, as financial needs of individuals and families changed and/or awareness of personal financial needs was emphasized (NEFE, 2020). Extension has long been a provider of financial management education to residents (Fox et al., 2005). Financial management education can improve the ability of households to handle financial matters and avoid the years it may take to overcome poor financial decisions (Karki et al., 2018). In Utah, an Extension statewide needs assessment (Narine & Meier, 2021) showed urban residents ranked individual financial planning as number one in the top 10 programs of interest. Therefore, recent literature demonstrates a need and preference for financial education among residents. However, the capacity and/or competency of Extension Educators to provide financial management education to residents is unknown.

**PURPOSE AND OBJECTIVES**

The purpose of this study was to examine the programmatic gaps related to financial management education (FME) at Utah State University Extension. Programmatic gaps were categorized into (a) clientele programming needs, and (b) professional development needs. Objectives were to (a) describe faculty's perceptions towards the importance of FME topics, (b) describe faculty's current delivery of FME to clientele, (c) describe faculty's perceived ability to provide FME to clientele, (d) assess programming needs based on observed differences between the perceived importance of FME topics and current delivery of those topics to clientele, and (e) assess professional development needs based on the observed differences between the perceived importance of FME topics and faculty's ability to provide training on those topics to clientele.

**METHODS**

Primary data for this cross-sectional study were gathered from Utah State University (USU) Extension faculty. The target population was all county-level faculty with a majority family and consumer sciences (FCS) appointment (in the Home and Community department of USU Extension). We attempted a census of the population (N = 47). With a response rate of 91.4%, the final sample size was 43 Home and Community (H&C) faculty in 24 out of 29 counties of Utah (n = 43). An online survey distributed via Qualtrics was used to collect quantitative data from the population in September of 2020. This study was determined exempt by USU IRB. We used a researcher-developed questionnaire to collect survey data.
from the target population (Ary et al., 2014).

The questionnaire design followed Dillman’s et al. (2014) recommendations on creating close-ended items. Following, the instrument was reviewed by the research team for content and face validity. The team had combined experience in needs assessment, program evaluation, financial management education (FME), and curriculum design. With exception of the evaluation specialist, the research team consisted of county faculty focused on H&C programming at USU Extension. The survey instrument consisted of four major sections: (a) perceived importance of FME, (b) current delivery of FME to clientele, (c) perceived ability to provide FME to clientele, and (d) professional appointment (county, current programming emphasis). Sections (a) to (c) focused on the most common topics found in FME curriculum, which were: personal financial management, household financial planning, preparing for homeownership, maintaining homeownership, debt repayment, managing expenses, retirement investments, insurance education, understanding credit, building savings, and fraud and identity theft protection.

In section (a), faculty were asked to rate the importance of each FME topic for programming in their county on a 5-point Likert-type scale ranging from “Not Important” (1), to “Very Important” (5). Similarly, respondents were asked in section (b) to indicate how often they historically delivered training on the topics to their clientele on a 5-point Likert-type scale ranging from “Never” (1) to “More than 10 times a year” (5). Lastly, respondents were asked in section (c) to self-assess their ability to provide training to clientele on each topic on a Likert-type scale ranging from “None” (1) to “Excellent” (5). Therefore, the needs assessment depended on an analysis of ordinal data from section (a) to (c) to determine programming needs and professional development needs.

Following Witkin & Altschuld’s (1995) needs assessment framework, “perceived importance” (section a) was treated as the desired state (i.e., “what should be?”), while current delivery (section b) and perceived ability (section c) were the “current state” (i.e., “what is?”). Therefore, programming needs exist when topics of high importance were rarely delivered to clientele. In addition, professional development needs exist when faculty had insufficient ability to provide training on topics of high importance. In contrast, a programming need did not exist when FME training was provided at an equal or greater amount than the perceived importance of the topic. Lastly, a professional development need did not exist when the faculty’s ability was at an equal or greater amount compared to the perceived importance of the topic.

Balancing the purist and pragmatist approach to describing ordinal data (Doering & Hubbard, 1979), authors used frequencies for objectives (a) through (c), and the non-parametric Wilcoxon-signed rank test to assess programmatic needs and professional development needs for objectives (d) and (e). As stated, a “need” is defined as the difference between two conditions: (a) perceived importance and current delivery (programmatic need), and (b) perceived importance and perceived ability (professional development need). In both cases, a statistically significant (at p < 0.05) Wilcoxon-signed rank test with negative z-statistic indicated the presence of a need.

RESULTS

OBJECTIVE (A): PERCEPTIONS TOWARDS THE IMPORTANCE OF FME TOPICS

Table 1 shows a descriptive overview of faculty’s perceptions towards the importance of educational programming related to FME topics. Items in Table 1 were ranked from highest to lowest based on the frequencies associated with “Very Important.” Results indicate more than half the number of faculty perceived personal financial management (59%) and household financial planning (54%) were very important topics for Extension programming. Similarly, managing expenses, debt repayment, and building savings were mostly viewed as important to very important topics for programming. Overall, over half the number of faculty indicated all topics except insurance education were either important or very important for educational programming to clientele in Utah.

OBJECTIVE (B): CURRENT DELIVERY OF FME TO CLIENTELE

A descriptive overview of the faculty’s current delivery of FME to clientele is shown in Table 2. Topics were ranked from highest to lowest based on their frequency of delivery. In relative terms, personal financial management, managing expenses, building savings, and household financial planning were delivered most often to clientele. However, over half the number of faculty have never delivered any of the FME topics listed in Table 2 to clientele. Likewise, 90% and 93% of faculty have never delivered education related to preparing for...
homeownership and maintaining homeownership to clientele, respectively. Overall, results indicate a generally low level of FME is provided to Extension clientele in Utah.

**OBJECTIVE (C): PERCEIVED ABILITY TO PROVIDE FME TO CLIENTELE**

Table 3 shows a descriptive summary of the faculty’s self-assessed ability to provide FME to clientele. Items were ranked from highest to lowest ability based on the frequency distribution of items. Over half the number of faculty in the sample indicated they had either above average or exceptional ability to provide clientele education on topics related to managing expenses, personal financial management, debt repayment, and building savings. In contrast, the majority of respondents perceived they had below-average ability to provide education to clientele on maintaining homeownership (34%), preparing for homeownership (38%), retirement investments (45%), and insurance education (45%). Overall, faculty self-assessed ability to deliver FME varied considerably based on topic.

**OBJECTIVE (D): PROGRAMMING NEEDS**

Table 4 shows the ranked programming needs based on faculty’s perceptions towards the importance of FME topics (objective a) and their current delivery of those topics (objective b) to clientele. Results of the Wilcoxon-signed ranked test indicated there were statistically significant differences (p < 0.001) in the perceived importance of all FME topics and faculty’s delivery of these topics to clientele. Based on the z-statistic of the Wilcoxon-signed ranked test, the highest ranked programming needs were personal financial management, building savings, debt repayment, and insurance education. However, there were only minor differences in the z-statistic across all items (-5.36 to -5.14); the gap between faculty’s perceived importance of each topic and their delivery of the topic to clientele were similar across all topics. Overall, results suggest a need to provide programming to clientele on all FME topics listed in Table 4.

**OBJECTIVE (E): PROFESSIONAL DEVELOPMENT NEEDS**

Table 5 shows the ranked professional development needs based on the differences between faculty’s perceptions toward the importance of a topic (objective a) and their ability to provide programming to clientele on the topic (objective c). Results of the Wilcoxon-signed rank test indicated there were statistically significant differences between the perceived importance of all topics and the faculty’s self-assessed ability to provide programming on the topics (p < 0.05). While personal finance management and household management were ranked highest, there was a need for professional development training on all topics related to FME based on the z-statistic.

**DISCUSSION**

The results of the needs assessment demonstrate an urgent need for financial management education (FME) throughout Utah, consistent with a statewide needs assessment of residents (Narine & Meier, 2021), while revealing the actual delivery of finance-specific classes is relatively low. The findings indicate Extension faculty lack the ability and confidence to teach finance courses to their clientele. A need exists to build competence through education with train the trainer opportunities as well as programmatic support. As confidence and competence increase, Extension faculty will be better equipped to meet the needs of their communities by providing research-based programs and resources to improve the financial wellness of individuals and families.

Implications for Extension include the need for continued administrative support to bolster the organizational capacity and existing efforts to provide FME in Utah, as well as address the need to hire an Extension Family Resource Management Specialist similar to other state Extension systems. This position would provide critical leadership, training, and resources to strengthen, reinforce, and encourage existing county faculty. Supporting statewide professional development efforts, providing resources to hire experts, coordinating a systematic effort to provide FME to clientele, and evaluating and visioning the path forward for success are all key roles of a specialist. The study provides a case for collaboration among faculty and experts who are confident in their ability to implement innovative FME professional development training and deliver clientele-based programs.

The results of this study are not generalizable to the wider population of FCS professionals in Cooperative Extension since it only gathered data from Extension faculty in the Home and Community Department of USU Extension. However, professionals working with families in and out of Utah may benefit from financial...
management education training to further support their clientele.

A programmatic needs assessment is an effective process to understanding organizational capacity. It provides the information necessary for tailoring professional development opportunities, fostering strong collaborations, and developing innovative programs for clientele. Future research should assess faculty's FME competence after receiving professional development training, and evaluate financial education programs to clientele to further refine an effective programming method to address financial management education needs in the community (Osteen et al., 2007).
Evidence suggests online education might be an effective tool for improving dietary behaviors among limited-income internet-using audiences. A needs assessment conducted among adults (n=869) eligible for the Supplemental Nutrition Assistance Program-Education (SNAP-Ed) in Utah determined interest in online classes, preferred online formats, and identified nutrition and physical activity-related concerns. Results suggest interest in online classes that build skills and knowledge needed to lead active, healthy lives. Additionally, Google, YouTube, and Facebook may be effective places for marketing and recruitment for online courses. Findings will be used to develop a free, asynchronous course based on a research-based SNAP-Ed curriculum.
Face-to-face nutrition education programs through Utah’s Supplemental Nutrition Assistance Program-Education (SNAP-Ed) program have been found to be effective teaching participants nutrition and physical activity-related skills to help reduce risk of chronic disease and obesity (Savoie-Roskos et al., 2019). While SNAP-Ed reaches thousands annually in Utah, many eligible individuals remain unreached. Furthermore, the internet is now a main source of nutrition information due to increasing family/work responsibilities, time constraints, and widespread internet access (Swindle et al., 2015). Nearly 90% of Americans have regular access to the internet (Pew Research Center, 2018b), with rates of internet usage and smartphone ownership increasing each year (Pew Research Center, 2018b). SNAP-Ed participants have similar rates of internet access and smartphone usage (Loehmer, et al, 2018). Evidence suggests online education might be an effective tool for: a) reaching internet-using audiences (Campbell et al., 2013; Bensley et al., 2011; Neuenschwander, et al., 2012; Stotz et al., 2019), and b) improving dietary behaviors (Au et al., 2015; Neuenschwander, et al., 2013). It may be as effective, if not more, at improving dietary knowledge and behaviors of participants attending in-person classes, particularly low-income Americans (Bensley et al., 2011; Neuenschwander, et al., 2013). In addition to being effective at catalyzing behavior change, online programs are a cost-effective way to increase program reach (Neuenschwander, et al., 2012; Stosich, et al., 2016). There are multiple methods of online and e-learning education delivery. Stotz et al. (2019) suggest careful consideration to the format and content within online education for program success -- particularly programs targeting limited-income audiences.

**OBJECTIVE**

The purpose of this study was to determine a) if SNAP-Ed participants in Utah were interested in online classes on nutrition and physical activity, b) online formats the limited-income audience most frequently used, and c) concerns related to nutrition and physical activity to guide online education format and content delivery.

**METHOD**

A needs assessment conducted for the Utah SNAP-Ed program in 2018 established client interest in online classes. The University faculty and marketing team followed best practices to develop an evidence-based survey (Dillman et al., 2014). To reach low-income internet users, the 13-question IRB-approved survey (Exempt Protocol #9552) was sent digitally to a listserv of SNAP participants, past attendees of SNAP-Ed in-person classes who subscribed to email lists, and followers of Utah’s SNAP-Ed social media. In addition, paper copies of the survey distributed in seven urban and rural counties expanded the reach. Respondents who completed the survey entered a drawing for a chance to win one of five $25 gift cards from a major online retailer.

The survey included six demographic questions and a question about participation in SNAP-Ed classes:
interest in online classes, interest in an online course series, nutrition and physical activity behaviors, and use of websites seeking information. Additionally, two open-ended questions asked about respondents’ primary concern regarding healthy eating and being physically active.

Descriptive statistics of survey responses collected in Qualtrics (Qualtrics, Provo, UT) and exported into SPSS 26.0 (IBM Corp, Armonk, NY) for analysis summarized participant demographics. Associations between categorical variables and interest in classes were assessed using chi-square tests for independence. Open-ended questions independently coded by two researchers identified patterns in responses. Researchers grouped responses into various categories, met to reconcile differences in the coding, agreed upon the categories, and then identified overarching themes.

RESULTS

Eight-hundred sixty-nine (1.5%) respondents completed the online survey out of approximately 59,550 people solicited in September 2018. The majority of respondents were non-Hispanic (83%), white (88%), female (88%), and 71% had not participated in a SNAP-Ed class (Table 1). Forty-five percent of respondents expressed definite interest in online nutrition/physical activity classes, 43% stated “maybe,” 38% were interested in a series of classes, and 44% responded “maybe.” Females were more likely than males to express interest in online classes ($p = .025$), however there was no association between gender and interest in a series of classes. Hispanics were more likely than non-Hispanics to express interest in both online classes ($p = .014$) and a series of classes ($p = .045$). There were no significant associations between age or race and interest in online classes. Google (88%), YouTube (51%), and Facebook (41%) were the most frequently selected options of where respondents go to find nutrition and physical activity information online.

Healthy eating concerns reported in response ($n = 859$) to the open-ended question about their number one concern when it comes to healthy eating were coded into three themes-- knowledge, preferences, and prohibitive factors. Table 2 summarizes the themes and subthemes identified from this question.

Knowledge encompasses barriers or or concerns addressed through direct education and skill building. Subthemes included knowledge gaps, time, portion sizes, specific food/nutrient concerns, and variety. Examples included confusion about how to eat healthy because of many different ideas on what is healthy, and healthy seems to take too much time.

Preferences refer to the perception that healthy eating would leave the respondent or his/her family unsatisfied, therefore making it difficult to sustain. Subthemes included family/child preferences, other food/taste preferences, and satiation. Examples were having to give up the food you love, finding ways to incorporate healthy foods into picky kids’ diets, and healthy eating will keep one full, and feeling like “when I eat healthy I can eat a ton of food.”

Prohibitive factors include tangible barriers that make it difficult to obtain or consume healthy foods or perceived as difficult for the individual to alter or control. Subthemes included special dietary needs, access/cost, pesticides/chemicals, and shelf-life of fresh food. Examples were price on a low-income budget it is difficult to always pick healthy choices for oneself and family and “choosing foods that have not been contaminated with pesticides.”

Physical activity concerns identified from responses ($n = 852$) to the question about their number one concern when it comes to being physically active included external individual factors, internal individual factors, motivators, and community level barriers. Table 3 summarizes the themes and subthemes identified for this question.

External individual factors include barriers that affect the individual, but do not pertain to the physical body, including time, family responsibilities, and lack of childcare, knowledge, motivation, or enjoyment. Examples included getting someone to watch the kids or understanding how to do physical activity with them, “limited time, and not knowing what to do.”

Internal individual factors impact the individual -- primarily the physical body or self, such as lack of energy, physical limitations, safety concerns, and dietary concerns. Examples include long term/permanent injuries preventing physical activity and overdoing and leading to injury.

Motivators include why people feel motivated to be active, including the subthemes of staying healthy and

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losing weight. For example, being able to manage weight, feel better with more energy, a better mood, feel more relaxed, and sleep better. Community level barriers include barriers environment, cost, and access. Examples are not having access to equipment or facilities to exercise due to cost, and cold weather preventing or reducing the desire to go outside to exercise.

DISCUSSION

Results from a sample of predominantly females and Hispanics suggest there is interest in Utah for online SNAP-Ed programming. Results also suggest that desired online education should focus on building knowledge and skills about how to eat healthfully with limited time and money. SNAP-Ed programs focus on building healthy eating skills with limited time and money, making it an ideal program to move to online formats. Additionally, education, ideas, and skills on safety during physical activity for all ability levels would likely help SNAP-Ed eligible participants become more active. The results from this study reinforce the need for knowledge, and skills, and concerns of SNAP-Ed audiences. It also provides insight into how SNAP-Ed programs, in-person and online, can motivate and inspire behavior change based on barriers to eating healthy and being physically active (Au et al., 2015; Bensley et al., 2011; Lee, et al., 2019; Neuenschwander, et al., 2013). While online SNAP-Ed classes build the knowledge and skills needed to live an active and healthy life, many respondents expressed community-level or external barriers that make healthy living difficult. Nationally, SNAP-Ed programs are in unique positions to address community-level factors through changes in policies, systems, and environments. This combination of direct nutrition education and community level change is more likely than direct education alone to result in behavior changes among the target audience (U.S. Department of Agriculture Food and Nutrition Service, 2020).

Furthermore, while programming targets participants who are interested in online courses, course developers should also consider if some of the reasons why people selected “not interested” can be remedied in course content or in the marketing of the course. Online programming marketed and maximized by paid ads on Google, YouTube, Facebook, Pinterest and Instagram, takes in consideration the study results showing where most participants spend their time online. These findings will be used to develop a free, asynchronous course based on the Create Better Health research-based SNAP-Ed curriculum (Savoie-Roskos et al., 2019).

STUDY LIMITATIONS

The study was on a convenience sample representing 1.5% of the target group. Similar studies could consider extending the time allowed for completion of the survey and send follow-up reminders to increase response rate. Data was self-reported, which increases the risk for response bias. The survey results represent Utah and is limited to is geographical reach.

FUTURE RESEARCH IMPLICATIONS

This study identified the needs and interest of SNAP-Ed eligible adults in Utah for online nutrition and physical activity classes, future research should compare online participants’ knowledge gain and behavior change to in-person participants’ results. Additionally, program curriculum and endeavors in policies, systems and environments SNAP-Ed programs could help identify participants’ perceived barriers to adopting nutrition and physical activity recommendations. Further research on intervention adoption to minimize the barriers discussed in this study and its effectiveness has the potential to strengthen both in-person and online programs.
The COVID-19 pandemic presented a unique phenomenon for working parents. During the registration for an educational webinar series, Extension professionals were asked “How has your parenting been impacted during the pandemic?” Analysis of short-answer responses (n=631) highlighted challenges and opportunities encountered by Extension professionals parenting amid COVID-19 disruptions. Constant comparative analysis of the responses identified five themes: 1) External factors; 2) Perceived parenting burden; 3) Family life changes; 4) Emotional toll; and 5) Spectrum of experiences. Findings provide insights into understanding and supporting those with the dual role of Extension professional and parent during COVID-19 and other crises.
The COVID-19 pandemic affected parents and family life like no other phenomenon in recent history. Social distancing directives associated with the pandemic disconnected families from support systems (The White House, Office of the Press Secretary, 2020). As a result, families were isolated from community, educational, family, and social systems that typically aid them in difficult times. Additionally, millions of children suffered distinct educational challenges resulting from the pandemic (United Nations Educational, Scientific, and Cultural Organization, 2020). Students were unexpectedly detached from in-person formal education. The abrupt shift from a traditional school-based model to a variety of home-education and/or virtual educational modes left parents with little transition time to manage their child's schooling (United Nations Children's Fund, 2020).

The pandemic public health protections imposed had consequences for families across the United States. Schools and childcare closures required many working parents to adjust to the loss of these resources while continuing to nurture and educate their children. This experience aligns with the definition of family stress: “a disturbance to the steady state of the family system” (Boss, 2014, p. 1). While most parents experienced some impact of these external and nonnormative stressors, some found it particularly difficult, even catastrophic, because the family was already vulnerable. Furthermore, the circumstances of each family presented unique opportunities and challenges impacting parents’ reactions during the pandemic. This aligns with Rosino's (2016) double ABC-X model of family stress and coping which describes how a multitude of factors affect the ways families adapt to crisis. Each with their own set of resources and stressors, parents adapted to the pandemic changes and stress in their own way. This data related to the cohort experience of Extension professionals parenting in a pandemic can provide insight into family stress, resilience, and work-life balance literature.

PURPOSE

This paper reports pandemic parenting experiences described in short-answer responses collected during registration for an educational webinar series targeting Extension professionals. The personal and professional development opportunity was promoted through national Extension networks, professional organizations, and social media platforms. While the original data were collected to inform the webinar series, qualitative analysis of the experiences described have implications for Extension professionals and supervisors. These responses provide insight into the unique opportunities and challenges Extension professionals who are parents/caregivers faced amid the COVID-19 pandemic. Additionally, while these findings describe the experiences of an arguably homogenous group, the findings may be relevant to other working parents.
METHOD

Extension professionals registering for the educational webinar series were asked to respond to a pre-questionnaire which included an open-ended question about impact of the pandemic on participants’ parenting experiences - “How has the pandemic affected your parenting?”. Data was collected between October 7 and November 18, 2020. The University of New Hampshire Institutional Review Board approved the study protocol.

The authors analyzed de-identified qualitative data from responses using Corbin's and Strauss' (2015) constant comparative method of immersion and incubation to identify explanatory patterns (Hatch, 2002). In the initial round of analysis, data were coded and categorized, and a codebook was created by the study team (DeCuir-Gunby et al., 2011). The second round of analysis examined themes across the data corpus, and researchers collapsed the open codes into non-overlapping categories. One member of the project team refined the coding on the entire data set, and another independently recoded the sample using the final codebook. (See codebook in Appendix). Three team members discussed the codebook after reviewing and independently coding a sample of approximately 20% of responses. Inter-rater agreement was 87.5%.

The initial data set included 769 responses; 631 responses were included in the analysis. Excluded responses include those indicating they are not a parent (n=47) and those that were too vague for analysis (n=91) (e. g. responses of “yes”, “no”, “okay”).

FINDINGS

Analysis of the responses yielded themes in five areas: 1) External factors; 2) Perceived parenting burden; 3) Family life changes; 4) Emotional toll; and 5) Spectrum of experiences.

External factors. Parenting impacts included loss of childcare, shifts to virtual school, and working from home. These shifts changed the context of day-to-day family functioning. Extension professionals who were working parents reliant on school or childcare were operating in a new environment with fewer supports and a need to limit activities. One parent remarked, “I have had to be a parent and a teacher while still working a full-time job, all at home.” Another felt they had to be “the bad guy” saying no to a lot of gatherings their son wanted to attend. One parent remarked, “The isolation is harming them more than the virus would.”

Perceived parenting burden. Participants reported tension between parenting and work responsibilities, in addition to the burden of guiding their children attending virtual school. Parents juggled multiple roles with few additional resources. One parent said, “It is hard to parent and teach. I don't get any breaks anymore. I'm with them all the time.” To meet obligations in these multiple roles, some parents sacrificed time: “I assist [my] child with online learning during school day and often spend weekday evenings/nights catching up on work obligations.” Another said, “I am a better parent and have loved being around my kids more, but my work has suffered.” In contrast, others had less time for family because of workload or “difficulty unplugging”, and problems “trying to set boundaries [to] get some work done at home.”

Limited interaction outside the household increased demands on parents to meet their children's social and emotional needs. Some parents were unprepared to provide this level of emotional support in addition to handling their own stress. A parent noted, “I don't have the tools to deal with some of the things my kids are dealing with.” While some parents reported no negative experiences, the strain of increased parenting demands and dealing with uncertainty affected the well-being of others. Some found having offer more emotional support and be the stabilizing force for their children to be draining. One remarked, “I am trying to maintain [my child's] emotional health, but I am not taking care of my health.” The lack of time for parents to practice self-care was also evident. One parent shared, “I feel like I need more time to myself but I don't get it.”

Family life changes. The uncertainty and lack of structure caused by the pandemic, combined with more time at home, influenced families in different ways. Some spent more time with children and gained a deeper understanding of their needs. One said, “I really love the extra time with my kids. I am immersed in their lives in a way I wasn't prior to COVID. I'm a better mom.” Others described impacts as positive and negative: “24/7 togetherness without a release valve increased tensions but also increased bonding.” Some found the closeness in the house to be exasperating and described having “too much time together.” Other concerns included “Inconsistent schedules with less structure” because routines changed and had not reached “a new normal yet.” Relaxed standards and increased leniency,
particularly for screen time, were reported as ways to compensate for loss of normalcy or as a way for parents to complete work tasks. One parent said, “I actually became much more lenient because I felt bad they were missing so much.”

**Emotional toll.** Parents reported feeling stressed, tired, and distracted. Additionally, having to choose work over family created tension and hard feelings. Remarks included, “I’ve never felt like a worse parent. Having to ignore my kids in order to work is awful” and “feeling agitated and putting my work over my child daily.” Others said, “I haven’t felt as present or that I am offering them what they need all the time.” One said simply, “I don’t get to be a good mom. I don’t get a break from anything.”

One of the most frequently reported pandemic parenting impacts was decreased patience, which was influenced by increased parenting demands and fewer breaks. One parent said the stress of working and childcare “made me snap at my kids when I normally wouldn’t.” Others reported having a “short fuse” or short temper, and one described “lashing out at my child over a small issue that would normally not bother me.” One said, “[I am] just so low on parenting patience when I feel like I am working 18 hours straight many days of the week to keep up.”

**Spectrum of experiences.** Responses from this group of Extension professionals parenting amid COVID-19 disruptions suggest a wide range of experiences – positive and negative – due to the pandemic. More than 10% (n=69) of respondents reported “no change”; the pandemic did not impact their parenting. Conversely, some became parents during the pandemic, compounding the stress that normally accompanies a new baby. Parents of adult children notably shared an array of experiences, including grief over not being able to comfort their child in person after losing a baby in childbirth and another feeling helpless to protect college-age children from the virus. Additionally, some reported significant effort caring for adult children: “Parenting and providing for adult children have been extremely difficult”. While other respondents expressed “No [change], my children are adults”.

Despite pressures from the pandemic, some respondents reported positive experiences stemming from more time for family and connection. Some parents reported the pandemic “allowed more quality time” and being “able to spend more time with children.” In contrast with virtual school challenges conveyed by some, one person remarked, “Our family is closer. We have really enjoyed being together more. So much that my son chose to do virtual school.” Another said, “My parenting has been enhanced greatly; working remotely from home has provided many wonderful opportunities.”

**DISCUSSION**

The pandemic created conditions that changed the routines, rules, and relationships in families. External factors affecting these changes support findings of others related to challenges resulting from virtual schooling, social isolation, and safety precautions (Brown et al., 2020; Toran et al., 2021). A model provided by Prime et al., (2020) explains, “… social disruptions from the pandemic will generate heightened levels of psychological distress for caregivers, impacting the quality of relationships…” (p. 632). Alignment of findings with this model demonstrates how pandemic contextual factors led to impacts described in the other four themes.

The concept of role conflict and overload was evident throughout responses. Previous studies captured perceived burdens of parents during the pandemic: managing working from home (Brown et al., 2020); changes to family routines (Prime et al., 2020; Toran et al., 2021; Chen et al., 2021); and challenges managing children’s academics (Brown et al., 2020; Prime et al., 2020; Chen et al., 2021; Lee et al., 2020). Findings from this study highlight how these pandemic parenting experiences related to the concept of role overload. As one parent described, “my parenting has become about triage”. These working parents were expected to nurture children’s emotional needs, manage children’s education, and contribute to their Extension careers and supervisors’ expectations – often simultaneously and under one roof.

Increased demands on parents altered how families operated day-to-day. Consistent with other studies, findings indicate disrupted family routines (Patrick et al., 2020; Toran et al., 2021), increased time together (Brown et al., 2020; Toran et al., 2021), and increased dependence on children’s use of electronics (Cellini et al., 2020). Parents creatively adapted to and navigated increased demands and shifting expectations. Responses suggest the cumulative burden of greater demands and uncertainty on multiple fronts took a
great emotional toll, which is confirmed by other studies reporting poorer mental health among parents (Patrick et al., 2020; Lee et al., 2020; Brown et al., 2020), increased stress (Brown et al., 2020), and changes in how they parented and interacted with their children (Toran et al., 2021). Feelings of inadequacy and guilt from impatience with children, and battling fatigue and distractions, weighed heavy on parents.

One subtheme unique to this study and unrepresented in the literature is tending to the needs of adult children. Most studies define parents as caretakers of children from birth through eighteen years of age (or a subgroup) and do not include parents of adult children. This subtheme was the most frequently reported in the dataset, demonstrating that parenting does not necessarily end when children stop residing in their parents’ home. Some respondents reported supporting the emotional needs of adult children or caring for grandchildren, while other reported no change with their adult children. The topic of working parents supporting adult children may be worthy of further exploration.

Finally, apparent throughout the responses was the range and variety of experiences. Some Extension professionals expressed challenges with parenting while others reported no change in their parenting during the pandemic. A subset shared positive comments and narratives demonstrating resilience. The heterogeneity of experiences and consequences of the pandemic were clear. Experiences spanned a continuum, starting with becoming parents for the first time during a pandemic, to caring for grandchildren or checking in on their adult child. Yet, age of children was not the only factor likely to affect parents’ experience and perceptions. In fact, the double ABC-X model of family stress and coping (Rosino, 2016) outlines factors affecting the ways families adapt to crisis: the pileup of stressors, existing and new family resources, and families’ perception of these stressors and resources. Prime et al., (2020) likened the challenges parents experienced and changes in parent-child relationships during the pandemic with impacts from the 2008 global recession. Findings reported here indicate factors contributing to family stress in the COVID-19 pandemic align with the double ABC-X model, which helps explain the different experiences among respondents. Further, alignment of findings with the double ABC-X model suggests that family scientists can anticipate how future crises may impact families and plan ways to provide meaningful support. Finally, while Extension professionals and supervisors cannot control all aspects of parents’ stress during crises, recognition of these reported themes, changed circumstances, and the variety of parent experiences during the pandemic can inform how to best serve Extension professionals who are also parents in the future.

**SUMMARY**

Study findings confirm that Extension professionals who are parenting can struggle, adapt, and persevere in the face of crisis. The pandemic created a new context and a sweeping set of stressful conditions for families. The variety of parent experiences aligns with Rosino’s (2016) double ABC-X model of family stress, supporting consideration of a variety of factors influencing how families adapt to crisis. Similar to findings reported by others, respondents reported changes in family life, discussed perceptions of parenting burden and role overload, and commented on the emotional toll of pandemic parenting. The theme of parenting adult children is unique to this study. Some reported minimal change or even positive outcomes from their pandemic experience. Regardless of the way each family experienced and interpreted the pandemic and its effects, this crisis created a cohort of working parents who continued nurturing and supporting their children while facing extraordinary challenges.

**LIMITATIONS**

While efforts were made to minimize bias, potential author bias in coding and analysis may have unintentionally influenced the findings. Some families may have been more vulnerable to negative pandemic effects due to demographic factors like race, income, and family type (e.g. single parents) (Chen et al., 2021; Patrick et al., 2020). The authors did not collect demographic data and cannot speculate on differences in experience due to these factors. Finally, researchers included responses from participants who may not have attended the educational webinar in the final data set. However, the final set of responses provides insight into challenges of a broad group of Extension professionals parenting in a pandemic. Responses provide a snapshot into the challenges of working for Extension and parenting during the pandemic, and
highlight some positive effects resulting from pandemic-induced changes to work and social life.

You may click here to access the references, tables, and graphs for this article.

March is LIVING WELL Month!

NEAFCS members developed this public awareness campaign in 2000.

Extension FCS Educators have access to promotional materials on the NEAFCS website to help promote and support local and state initiatives in nutrition, healthy lifestyles, food safety, financial management, parenting and environmental health enable citizens to gain knowledge and skills to lead full and productive lives. Learn more at: www.neafcs.org/living-well-month-campaign

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Beating the Pandemic Blues

Mental health during the winter months can be impacted by Seasonal Affective Disorder (SAD) and the winter blues. In the winter of 2020-2021, the COVID-19 pandemic also took a toll on mental health. Extension Educators partnered with their university’s Chief Wellness Officer to offer a six-part webinar series for faculty, staff, and students to help with SAD and the pandemic blues. The educators also offered a series for the public. Survey results indicate for most sessions, over 90% of participants reported they could use the information presented to cope with current circumstances and agreed the information presented would help them.
The year 2020 was like no other as the entire world faced a “once in a lifetime” global pandemic. Mental health concerns surfaced among youth and adults alike as they struggled to cope with COVID-19 and its widespread impacts on daily life. A survey of over 1,500 teenagers commissioned by the National 4-H Council in May 2020 found that 70% were struggling with their mental health. Of those surveyed, almost two-thirds (64%) said they believed the pandemic would have a lasting impact on their mental health. Similarly, a survey commissioned by the Kaiser Family Foundation in July 2020 found that 53% of adults in the United States felt their mental health had been negatively impacted by worry and stress associated with the pandemic (Panchal et al., 2020).

As the pandemic stretched into the fall and winter months of 2020, mental health concerns were compounded by Seasonal Affective Disorder (SAD) and the winter blues for certain individuals. SAD is a type of depression displaying a recurring seasonal pattern, typically starting in the late fall or early winter, and going away in the spring and summer (Galima et al., 2020). Recent articles on SAD prevalence (Galima et al., 2020; Melrose, 2015) cite research studies that estimate 10-20% of cases of recurrent depression follow a seasonal pattern (Magnusson, 2000) and associate the prevalence of SAD with distance from the equator (Rosen et al., 1990; Horowitz, 2008). A 1990 research study of SAD prevalence at four locations in the United States found a high prevalence of 9.7% in New Hampshire and a low prevalence of 1.4% in Florida (Rosen et al., 1990), and a later study found the prevalence of SAD in the United States ranges from 1% in Florida to 9% in Alaska (Horowitz, 2008).

**OBJECTIVE**

For Extension professionals in the northern half of the country, sharing information about SAD with the public may be warranted. For educators everywhere, sharing mental health resources and offering support for individuals suffering through the pandemic was vital. The purpose of this paper is to share how a team of Extension Educators created a “Beating the Winter Pandemic Blues” series that they delivered and evaluated in December 2020 – January 2021.

**METHOD**

In 2018, a county-based Family and Consumer Sciences (FCS) Educator for Ohio State University (OSU) Extension developed a presentation titled “Beating the Winter Blues” that outlines signs, symptoms, and risk factors for SAD and covers evidence-based strategies to promote physical, mental, and social health in the winter months. The presentation was reviewed by an FCS Educator for OSU Extension in a neighboring county. Between January 2018 and January 2020, the author and reviewer shared this presentation with 32 individuals. The content attracted a universal audience; participants ranged from young adults to seniors who attended presentations at a worksite, a church, a senior housing center, and on a college campus.

In September 2020, the author and reviewer shared the content of their “Beating the Winter Blues”
The program evaluation that participants were asked to complete after each session of the “Staying Calm and Well” series included the following statements:

1. I can use the information from this session to cope with current circumstances.
2. I plan to use the content that I learned from this session on a regular basis.
3. I believe the information in this session will help me take better care of my health and wellbeing.

For each question, response options included strongly agree, somewhat agree, neither agree nor disagree, somewhat disagree, and strongly disagree.

Participants who attended sessions in the “Beating the Winter Pandemic Blues” series for Extension clientele were asked to complete a program evaluation after each session that included the following questions:

Did you learn new information today? Yes or no.
- If yes, please list one new thing you learned today.

Will you use the information presented today?
- Definitely, probably, probably not, or definitely not.
- If yes, please share how you will use the information presented today.

RESULTS

For the five sessions in the “Staying Calm and Well” series, the average attendance per session was 598 people participating live and 401 people viewing the recording later. The average response rate for post-session evaluations was 99%. Among those who completed evaluations, 92% indicated they could use the information presented to cope with current circumstances, 91% agreed the information presented would help them take better care of their health and wellbeing, and 90% were planning to use the content they learned on a regular basis. Evaluation data for each session in this series is displayed in Table 1.

For the sessions in the “Beating the Winter Blues” four-part series, the average attendance per session was 71 and the average response rate for post-session evaluations was 26%. Among those who completed evaluations, 93% indicated they learned new information and 84% were planning to use the content they learned. Evaluation data for each session in this series is displayed in Table 2.
When asked to share what they learned, participant responses varied and included the following:

- The difference between winter blues and SAD
- That I am not alone
- Gratitude can help you destress
- Uni-tasking
- The 20/20/20 rule to give my eyes a break
- Strategies to limit screen time
- Suggestions for tech-free mealtime
- Exercising in increments is still OK!
- Any amount of exercise is better than none
- The mental health benefits of exercise
- Laughter can relieve pain
- How little adults laugh compared to children
- How much stress can be reduced with laughter

When asked to share how they were planning to use the information presented, participant responses included the following:

- Try to reach out to more friends and family during this season
- Try to get more sleep
- Try to get outside more as I know it can help
- Get back into an exercise routine
- Take more breaks from the screen
- Turn off phone notifications, especially news headlines
- Delete/unsubscribe to email newsletters I am not interested in reading
- Restore the practice of turning off screens 1-2 hours before bedtime
- Be more intentional about incorporating laughter into my life
- Watch humorous videos and shows every day to reap the benefits
- Laugh more, and check out (funny) memes or videos when I need a boost

Keep this info in mind when interacting with others—they may be struggling as well

**SUMMARY**

People of all ages struggled with mental health challenges related to the COVID-19 pandemic. As winter approached, a team of FCS Educators realized that struggles related to Seasonal Affective Disorder (SAD) could compound the challenges many people were already experiencing related to the COVID-19 pandemic. The educators' collaboration with the university's Chief Wellness Officer (CWO) allowed them to provide information about Seasonal Affective Disorder and the pandemic blues in a timely manner to faculty, staff, and students within their university community. Results from the series indicate on average 92% of participants could use the information presented to cope with current circumstances, 91% could use the information to better take care of their health and wellbeing, and 90% planned to use the information they learned regularly. Additionally, an average of 93% of participants in the four-part “Beating the Winter Blues” series indicated they learned new information and, on average, 84% were planning to use the information.

These results are limited, however, because participants in the “Staying Calm and Well” series were mostly staff enrolled in the OSU Health Plan. By attending the webinars, participants enrolled in the health plan’s wellness program earned points that could be redeemed for gift cards or other health and wellness incentives. One could conclude that the participants already had more of an interest in and a willingness to adopt health practices than the general population. OSU was the first university in the U.S. to hire a Chief Wellness Officer, which demonstrates the commitment of the organization to promoting the overall health and wellness of the greater university community. Employees are regularly encouraged to practice self-care and to participate in activities, programs, and educational offerings that promote health and wellness. People who work for companies or organizations where this support and encouragement is lacking may not be as willing or able to use the information, even though they may desire to participate.

Participants in the “Beating the Winter Blues” series were mostly people who “subscribe” to one or more of the OSU Extension Live Healthy Live Well (LHLW) Team’s health promotion sites. The LHLW team has a Facebook page where daily posts are made related to various health and wellness topics, as well as a blog where posts are made twice weekly. People who “subscribe” to these sites may also participate in the semi-annual LHLW email wellness challenges. These challenges run for six to eight weeks and offer twice-weekly emails on various wellness topics. Again, one could conclude that participants in this series already had an interest in practices that may improve health and, therefore, were more willing to embrace the information.
Although participants in these webinar series may have already had a vested interest in health and wellness, the success of these series demonstrates that by leveraging existing wellness initiatives, Extension Educators can increase their reach with timely and relevant programming. Participants in the “Staying Calm and Well” series found the information about SAD and the pandemic blues useful for coping with current circumstances. By collaborating with the CWO, educators were able to reach an audience that may not have otherwise participated in Extension programs. Thus, this webinar series provided the opportunity to “showcase” unique Extension programming for a non-traditional audience.

While already familiar with Extension, many participants in the “Beating the Winter Blues” series still learned new information and indicated they were planning to use the information presented. In this series, packaging familiar content in a novel way reached clientele in a timely and relevant manner. The series described in this article are examples of how Extension professionals are bringing the resources of the university to their audiences and responding to critical needs during one of the most challenging times in recent history.

1. How does winter affect you?

- My appetite changes 9.79% (19)
- My sleep pattern changes 12.37% (24)
- My energy level changes 29.38% (57)
- I feel less social 12.89% (25)
- I feel tired or sluggish 20.10% (39)
- I feel depressed 10.82% (21)
- None of the above 4.64% (9)
The use of reusable water bottles has increased significantly over the past two decades and research suggests a need for increased education on the proper use and care of such bottles. The University of Idaho Educators developed a project to study the use and care of reusable water bottles by middle-school-age youth. The goal of the project was to study and increase the student’s knowledge of food safety practices when reusing water bottles. This was done by using pre-and post-surveys in control and intervention groups, to assess students’ knowledge of correct care and use of reusable water bottles.
Drinking water is needed for life and consuming the recommended amount daily is an important health message supported by the Center for Disease Control (CDC, 2020) and the Mayo Clinic (2017). To meet this recommendation, it is common practice for persons to carry a reusable water bottle. In a school setting, students are encouraged to bring reusable water bottles. However, reusable water bottles provide optimal growth conditions for microorganisms. Water bottles may become contaminated by sharing, setting them on contaminated surfaces, opening or filling the bottle with hands that are not clean, and contact by user’s mouth that may possess microorganisms. A water bottle in a school setting, carried from classroom to classroom, is exposed to hundreds of students throughout the school day and may also be exposed to extracurricular activities. Once a water bottle is contaminated and contains potable water, the water supports microbial growth and becomes unsafe to drink (Lui & Lui, 2017).

**REVIEW OF LITERATURE**

According to market research, the adoption and use of reusable bottles for drinking water and other beverages have increased greatly in the United States and other countries over the last decade (Grandview, 2021). Due to this change in consumer behavior, there have been several studies conducted looking at the potential for microbial contamination and growth in reusable drinking water bottles. Lui & Lui (2017), examined reusable bottles used by adults and children and found the bacterial content is high and can increase rapidly, 1 – 2 million counts/ml in one day. In another study Sun, S. et al. (2017) found high bacterial content in reusable water bottles, and whether individuals washed/rinsed their bottles or not significantly affected contamination level. Research by Hubbard, et al. (2019) discovered the presence of an antimicrobial-resistant, biofilm-forming bacteria in their study of reusable water bottles. The research also pointed to a need for the development and promotion of proper cleaning procedures for reusable water bottles. Reusable water bottles were tested, and bacteria counts were higher when compared to samples taken from a toilet seat (Ballweg, et al.). A Canadian study of youth water bottles revealed total coliform in 13.3% of 75 samples and fecal coliform and total heterotrophic criteria for The Canadian Drinking Water Quality Guidelines (CWQG) criterion were exceeded in 8.9% (of 68 samples) and 64.4% (of 76 samples) respectively (Oliphant et al).

The objective of this literature review was to examine current research, findings, and recommendations on the use of reusable water bottles. It is evident from the research reviewed there have been significant findings of bacterial contamination and rapid bacterial growth, especially in bottles that are not cleaned and sanitized. The research has also demonstrated a need for the promotion of proper cleaning and sanitizing procedures for reusable water bottles.

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Based on a review of the literature, Family Consumer Science Educators found it relevant to develop and study the implementation of a reusable water bottle cleaning protocol to educate middle school children in intervention sites to compare with control sites where education was done retrospectively. The desired short-term impact was to increase the use of properly cleaned reusable water bottles, and to teach about water consumption through the educational materials developed. The youth and teachers that participated increased their knowledge of food safety practices when reusing water bottles by demonstrating correct washing techniques and handling.

An anticipated long-term impact was to influence water bottle use school policies by sharing study results with teachers and school administrators. By conducting water bottle food safety research in schools, faculty developed collaborative research to disseminate to schools, health departments and write for peer-reviewed publications. In this project faculty collected, evaluated, and transferred new knowledge to community members. The faculty have continued to transfer this information through the development of an Extension Bulletin, Infographic, and other publications.

The average post-survey ranking for each statement was higher than pre-survey ranking. This indicates a significant increase in knowledge on how to correctly clean and sanitize a reusable water bottle and avoid spreading germs with a reusable water bottle after the intervention. A two-sample paired t-test was used to compare the average of the intervention and the control post-survey responses (See Table 1).

The average intervention post-survey ranking for each statement was higher than the control post-survey ranking. This indicates that after the study students in the intervention group reported significantly greater knowledge in how to correctly clean and sanitize a reusable water bottle and avoid spreading germs with a reusable water bottle than students in the control group. Students in the intervention reported washing their water bottles significantly (p<0.05) more often after the study than students in the control group. Students in the intervention group also indicated drinking more water after the study than students in the control group, but it was not significantly different.
DISCUSSION

Intervention youth reported increased knowledge of correct washing techniques, sanitizing, and handling of bottles. The survey findings show the average intervention post-survey ranking for each statement was higher than both intervention pre-survey and the control post-survey ranking. This may suggest that receiving education before using a reusable bottle resulted in youth being more likely to clean and sanitize a reusable water bottle and avoid spreading germs. The survey results also suggest that using classroom instruction and educational tools, like an infographic, were successful methods to teach proper cleaning and use of reusable drinking water bottles. Further research and studies are needed to discover the effects of this type of education on knowledge gain and behavior change in youth’s cleaning and care of reusable drinking water bottles.

You may click here to access the references, tables, and graphs for this article.

The Institutional Review Board of the University of Idaho granted approval of this research. Funding for this project was provided by a University of Idaho Extension Innovative Project grant. The University of Idaho is an equal opportunity employer and education provider. The authors have no conflicts of interest to disclose. An extension bulletin and infographic can be accessed and downloaded at www.extension.uidaho.edu/publishing/html/BUL971-H20-to-Go-Staying-Hydrated-Safely.aspx.
The local food policy council partnered with Extension to promote public education and outreach on food issues to council members and the community. Forty-seven individuals attended food system field trips led by Extension staff throughout the year, and 26 participants completed a retrospective survey to assess perceived benefits. More than 75% reported gaining knowledge and confidence to do food systems-related work. Food system field trips provide an interdisciplinary learning experience that helps increase food council member knowledge and confidence to do food system-related work, essential for stakeholders whose actions may affect access to healthy food.
The food system is vast and encompasses all aspects related to food, from its source, to the table, and beyond. Basic learning about the food system consists of identifying its key activities, such as agricultural production, processing, distribution, transportation, retail, consumption, and disposal. However, deeper learning occurs when the inter-relationships of its key activities and responsiveness to external factors such as the economy, climate, availability of natural resources, impacts on health, and equity are better understood. Everyone who eats has a stake in the local food system and the potential to transform it through individual food choices or collective action. Community decision-makers, such as food policy council members, may be able to provide better leadership impacting policies, systems, or environments that influence community health if they possess a systems-level knowledge of the local food system.

**LITERATURE REVIEW**

Food literacy is a term used to describe individual competence or knowledge about food. The Ontario Dietitians for Public Health website (2021) describes food literacy as “a set of interconnected attributes organized into the categories of food and nutrition knowledge, skills, self-efficacy/confidence, food decisions, and other ecologic (external) factors such as income security, and the food system.” They propose a Framework for Healthy Eating guided by individual attributes categorized as food and nutrition knowledge, food skills, and self-efficacy and confidence. These attributes help a person navigate external ecologic factors, such as the local food system, to make informed food choices that support health (Locally Driven Collaborative Project Healthy Eating Team, 2018).

Food policy councils are bodies of stakeholders formed to improve the food system. The Johns Hopkins Center for a Livable Future's Food Policy Network website (2021) defines food policy councils as diverse networks that address food-related issues and needs in a designated area. It also explains that collaborative capacity is vital to help food policy councils make meaningful change through policy within their food system. Collaborative capacity has been described as the organizational ability to create inter-organizational systems with the aspiration of achieving collective impact (Thomas, Hocevar, & Jansen, 2006). A food council’s influence may be determined by the geographic area it serves (e.g., local, state, or regional). Other factors that may limit or enhance its level of influence include its structure, the logistical and financial support it has, external factors like political climate or community context, and the attributes of its members, including leadership, dedication, diversity, and knowledge (Harper, Shattuck, Holt-Giménez, Alkon, & Lambrick, 2009). As food council members represent different sectors and possess varying degrees of food system knowledge, opportunities exist to increase council member capacity through learning.
states that effective learning should include: concrete experiences; reflective observation about the experience; abstract conceptualization, new ideas, and learning; and active experimentation or application of ideas (McLeod, 2017). The social capital of council members and community support of their work, both essential elements of food policy council effectiveness, may be modified using educational efforts focused on food system issues (Calancie et al., 2018). Pedagogy themes such as collective action, systems thinking, experiential learning, and interdisciplinarity should be a part of sustainable food systems education (Valley, Wittman, Jordan, Ahmed, & Galt, 2017). Experiential learning consists of learning outside of the traditional classroom with field trips or studying abroad (Claiborne et al., 2020). Thus, food system field trips can provide an interdisciplinary learning experience to help increase food council member knowledge related to healthy, sustainable, and resilient food systems, potentially increasing the effectiveness of their food policy councils.

**PURPOSE**

The purpose of providing food system field trips to food policy council members and the community was to increase knowledge and awareness about the local food system. Extension staff proposed that the food council and community members could improve their capacity to act on local food system issues through increased food literacy at the personal level, considering the attributes of knowledge, confidence, and awareness of ecological factors.

**METHOD**

The Extension Healthy Food Systems (HFS) team in a large urban Extension office in Las Vegas, Nevada, provides the local food policy council with logistical support. Extension support includes facilitation and a community space to convene regular meetings, administrative support such as distributing agendas, keeping meeting minutes or routing information, maintaining the food council website, and other logistical activities. Through the many different programs that Extension offers to and with the community, its staff has developed excellent relationships with a large and diverse group of stakeholders representing a wide range of activities within the food system. Thus, it was easy for Extension staff to arrange educational opportunities such as food system field trips. The Extension partnership also helped meet one of the food council’s overall goals of promoting public education and outreach on food issues.

As a result, the HFS team created educational field trips made available first to food council members, and then if space remained, were opened up to the community. Extension offered transportation whenever possible and gave field trip participants the option of arranging their travel or meeting at the field trip location. In 2019, five food system field trips were offered, including:

- The largest hydroponic indoor vertical farm in Las Vegas, NV at 215,000 square feet that grew a wide selection of lettuces, microgreens, herbs, and more;
- The largest (110,000 square foot) residential recycling center in North America, home to state-of-the-art recycling technologies which feature an interactive Learning Center that gives visitors a rare, first-hand view of the recycling process;
- A 140,000 square foot, Safe Quality Food (SQF) Program Level 2 Certified produce distribution and processing center which inventories and distributes over 2,500-line items of bulk and fresh-cut fruits and vegetables;
- A large 3,000-acre 9,600 cow dairy farm located just 100 miles northwest of the city that milks its cows twice daily in state-of-the-art milking barns, produces both conventional and organic milk, has its calf ranch and an onsite compost area; and,
- A tour of three vastly different community gardens, including a newly developed one-acre community garden operated by a local church located in a low-income food desert, a well-established public four-acre community garden in downtown Las Vegas which also hosts community social events, and a lush two-acre neighborhood community garden with an orchard, egg-laying hens, pizza oven, and covered meeting space.

In December 2019, a program evaluation was done using a retrospective survey. The survey link was emailed to the 47 people (11 of whom were food council members) who had signed up for a field trip throughout the year. Some participants brought a guest who did not need to provide an email to attend; thus, they were not sent a survey. The anonymous survey asked participants about themselves and their work, which field trips they had attended, and what types of trips they would like in the future. It also included several questions about the perceived benefits they associated with their experience.
RESULTS

Of the 47 surveys emailed, 26 were returned and completed, for a total response rate of 55%. The mode for the number of field trips that respondents reported attending was two, and 17 respondents attended two or more trips. Eight of the survey respondents represented education, 11 were from government agencies, six came from non-profit organizations, and one was from a farm. The top four content areas the participants reported working in were local or community food systems, health, youth, and economic development.

The majority of the respondents (88%) worked for employers that had or were developing food system goals, and 92% believed that progress towards achieving those goals was likely within five years. All respondents thought learning about the food system was very important to help them build their food system network. All believed learning was moderately to very important in helping identify, understand, and address food system issues. At least 76% of those who attended a field trip agreed with statements indicating gains in food system knowledge, social capital, and confidence (Table 1).

A variety of responses were provided for survey respondents to choose topics or places they would like to see or visit in future field trips. Although a free text option was given, no respondents decided to fill in the blank. The number of responses (and their corresponding percentages) indicating interest included the following:

- School food service / Institutional food program – 21 (84%)
- Animal food production / farm – 15 (60%)
- Landfills / waste – 12 (48%)
- Food banking / food pantries – 20 (80%)
- Grocery / retailing – 18 (72%)
- Culinary programs / union – 21 (84%)

The next question allowed respondents to write in free text about other desired food system services or programs. Common responses included volunteer opportunities, more educational experiences, webinars, guest speakers, hands-on participation, networking opportunities, and community outreach. The end of the survey allowed general feedback, which was very positive and supportive of the field trips, e.g., “Keep arranging interesting trips, let’s have a meal or snack afterward, and let’s share our takeaways from the learning experience.”

DISCUSSION

The purpose of providing food system field trips to food policy council members and the community was to increase knowledge and awareness about the local food system and its related issues. Of the 47 people that signed up to attend a field trip, 11 were food policy council members making up 23% of the total attendees. Although slightly less than one-fourth of all attendees, this number accounted for 73% of the 15 active council members at the time. Twenty community members attended, but higher community participation would have been preferred.

At least 76% of those who attended a field trip and responded to the survey perceived gains in one or more positive attributes (Table 1) associated with food literacy. For food council and community members alike, gains in food literacy should help them make more informed personal choices despite external factors like socio-cultural influences, socio-economic status, or environmental conditions (Desjardins & Haliburton, 2013). This increased awareness of external factors also contributes to increasing the capacity of food policy council members to make informed decisions and entertain innovative ideas to improve community resilience and health while considering food system issues.

A significant aspect of these field trips is the partnership with Extension through provision of resources, both capital, and human. By nature of its programming and mission, Extension is ideal for providing education regarding the food system. It has relationships with most key players in the food system, facilitating connections to engaging experiential opportunities. Its staff knows how to conduct non-traditional educational activities to maximize learning and improve outcomes. Nearly half of the total field trip participants (22) were Extension employees who helped fill available spaces at the last minute or transported tour participants. Since the field trips gave staff opportunities to build their knowledge about relevant food issues related to their Extension work, the trips contributed to their professional development. In this case, the partnership was mutually beneficial and a good example of how Extension can support a local food policy council to provide community-based food system education with human resources,
transportation, technology, and communication.

In-kind support provided to food policy councils also helps free up precious limited funding that is a needed resource that many councils need more of or lack. Approximately 68% of the 269 food policy councils surveyed in 2018 reported an annual budget of less than $10,000, and nearly half of those had zero funding (Bassarab, Santo & Palmer, 2019). In Las Vegas, Extension has helped the local food council achieve its goal of promoting public education and outreach on food issues by organizing and co-leading these food system field trips.

Future Extension and food council food system field trips will be planned at sites that help meet the desired topics of learning expressed in the survey. Future field trips will feature reflection time to enhance participant learning as requested by survey respondents. Extension is also considering incorporating a shared meal or snack into future trips as suggested by a survey respondent. This would provide an ideal time for reflection and discussion amongst participants. A limitation of this project was using Eventbrite to capture registration instead of taking attendance on site. An improvement will be to ask for contact information for follow-up just prior to engaging in the field trip experience. Another limitation was not knowing how many respondents were food council members since this question was not asked. Future evaluation should consider whether knowledge gains from experiential food system education helps the council as a whole achieve greater effectiveness.

In conclusion, this paper provided an overview of a food policy council and Extension partnership that provided its members and the community with experiential food system education. The combination of Extension resources and the food council's purpose provided a mutually beneficial opportunity to increase food literacy among the community, and increase the food policy council's capacity and confidence as citizens engaged in the food system. It makes good sense and good stewardship for Extension to partner with food policy councils to help them achieve their goals and maximize their precious resources, so food council members can focus their work on building more healthy, sustainable and resilient local food systems.
Online Tools for Extension Professionals to Help Families Talk about Race and Racism: A Resource List and Evaluation Method

This article provides a list of 11 online resources systematically evaluated for relevance and credibility. Extension faculty and staff can use these resources to educate themselves and the public on how to discuss the topics of race, racism, and anti-racist. The criteria utilized to evaluate the quality of these online resources are provided and can be used by Extension professionals to evaluate the quality of online materials on any topic.
The authors of this article are four members of a recently formed working group at the University of Arizona Cooperative Extension whose goal is to provide resources to educate parents about race and racism, as well as support meaningful conversations between parents and children about social justice and equity. This working group was created in response to participants of parenting education programs requesting information from Extension faculty and staff about how to talk to their children about racism during the summer of 2020. This informal group came together to create resources that would prepare Extension faculty and staff to answer these requests. The group determined that we would adopt an anti-racist focus, which we define as actively working to dismantle racist ideas, beliefs, behaviors, policies, and social structures (Kendi, 2019).

We prepared a series of Extension publications and fact sheets on topics including how to talk to children about race and racism, how to use children’s books to promote anti-racism, resources for parents to begin their own anti-racist journey, and anti-racist terminology. Contained in this article is a list of online resources systematically evaluated for relevance and credibility which were collected as part of this work. We hope that Extension faculty and staff will use these resources to educate themselves and the public about race, racism, and anti-racism. These resources may be best suited for Family and Consumer Sciences (FCS) programming, but the evaluation methodology can be used across all Extension program areas. Becoming knowledgeable in these topics will allow Extension professionals to provide resources to those who are interested, feel prepared to answer questions from the people they serve, and navigate complex social justice conversations.

While Extension professionals have always focused on reaching underserved and diverse populations, additional efforts are needed to bring inclusivity and openness about controversial topics to the forefront of programming. This goes beyond incorporating equity, diversity, and inclusion into outreach and marketing materials. It is necessary to weave anti-racist information and education throughout all program delivery. Allowing open conversation about sensitive topics such as race provides an opportunity to mindfully educate in the communities we serve.

Racism exists at several levels: individual, interpersonal, institutional, and structural (National Museum of African American History and Culture, 2020). Extension is well-positioned to make an impact on all of these levels. Through policy, systems, and environment work, we can have a positive impact on institutional and structural racism. We can also affect interactions between individuals by educating them about anti-racism, the deliberate effort needed to overcome the unconscious biases we all have, and by helping parents begin conversations about race with their children.
It is important that parents and caregivers talk openly with children of all ages about race, racism, and anti-racist work. These conversations and exposure to different races should begin as early as six months (Anderson & Dougé, 2020). Between two and three years of age, children begin to categorize behaviors, both their own and those of others, based on race (Hirschfeld, 2008); essentially creating patterns of expected behavior for individuals of different races. Some research findings suggest when children are as young as four or five they are likely to favor their own racial group and assign positive attributes to their group (Lee et al., 2017; Aboud & Amato, 2001; Cristol & Gimbert, 2008; Katz & Kofkin, 1997).

### OBJECTIVE

In this paper, we provide a list of online resources that can be used by Extension professionals and the parents they serve to learn more about race, racism, and anti-racist work. All of the resources meet three criteria for relevance and five criteria for credibility. The list is divided into three categories: 1. Resources to help parents and other caregivers talk to their children about race and racism, 2. Resources to help parents and other caregivers find children’s books, and 3. Resources to help adults and adolescents better understand race, racism, and anti-racist work. This list can be used by Extension professionals to educate themselves and the parents and other caregivers they serve.

### RESULTS

Table 2 includes nine online resources that met the three criteria for relevance and the five criteria for credibility. Our working group identified 17 multi-page online resources. Four online resources were eliminated because they did not meet the relevance criteria, two were eliminated because they did not meet the accuracy criteria, and one was eliminated because it did not meet the authority criteria.

### METHODOLOGY

To compile the list of online resources, we first created a list of all multi-page websites collected while preparing Extension publications and fact sheets as a working group. We included only multi-page sites and excluded individual pages (e.g., blog posts and articles) because multi-page sites are more likely to be permanent and frequently updated. Next, we evaluated three separate inclusion criteria to establish the relevance of each website as shown in Table 1. We then evaluated the credibility of each resource using the five components of credibility identified by Metzger (2007) in her review of the literature: accuracy, authority, objectivity, currency, and coverage. We operationalized these five components using the inclusion criteria shown below.
<table>
<thead>
<tr>
<th>Table 1.</th>
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<tr>
<td><strong>Relevance Criteria</strong></td>
<td><strong>Inclusion Criteria</strong></td>
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<td></td>
<td>1. Website created for the public or a general audience. If the audience is not stated, then the site is written in plain language and does not include scientific jargon.</td>
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<td></td>
<td>2. Website promotes anti-racism. Anti-racism is defined as the active dismantling of racist ideas, beliefs, and policies.</td>
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<td>3. Website is free and is accessible by people in every U.S. state, Washington, D.C. and the territories. <em>Website was only included if all criteria were met.</em></td>
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<td><strong>Credibility Criteria</strong></td>
<td><strong>Inclusion Criteria</strong></td>
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<tr>
<td><strong>Accuracy</strong></td>
<td>1. Website includes citations AND the sources cited are peer-reviewed articles, scholarly books, or U.S. governmental offices.</td>
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<td>2. Website or individual articles on the website or sections of the website are written by, reference, or include quotes from experts. Experts are defined as individuals with advanced degrees in a relevant field or another relevant credential (e.g., employment at a university or in a U.S. governmental office). <em>Website was included if either criterion was met.</em></td>
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<tr>
<td><strong>Authority</strong></td>
<td>1. Website was created by a U.S. government office, professional association, or university AND contact information for the office, association or university is provided.</td>
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<td>2. The authors of individual articles on the website or sections of the website are identified AND are experts. Experts are defined as individuals with advanced degrees in a relevant field or another relevant credential (e.g., employment at a university, relevant professional association, or in a U.S. government office). <em>Website was included if either criterion was met.</em></td>
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<tr>
<td><strong>Objectivity</strong></td>
<td>1. The intention or goal of the website is stated clearly</td>
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<td></td>
<td>2. Language on the website appears to be free from bias.</td>
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<td></td>
<td>3. No obvious conflicts of interest or commercial interests are identified. <em>Website was included only if all criteria were met.</em></td>
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<tr>
<td><strong>Currency</strong></td>
<td>1. Website was published or updated after 2010.</td>
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<td>2. Links on the website work (i.e., they are not dead links). <em>Website was included only if both criteria were met.</em></td>
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<tr>
<td><strong>Coverage</strong></td>
<td>1. No obvious gaps in what is covered based on the stated intention or goal of the site. <em>Website was included if this criterion was met.</em></td>
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**Author's Note:** This work would not have been possible without the work of the University of Arizona Cooperative Extension Anti-Racism Working Group and each of its contributing members: Jennifer Argyros, Ashley Dixon, Benjamin Downer, Shevonda Joyner, Daniela Davila Pacheco, Jenn Parlin, Rebecca Serratos, Kate Speirs, and Christy Stuth. Thank you.
<table>
<thead>
<tr>
<th>Name</th>
<th>URL</th>
<th>Description from the Website</th>
<th>Author or Creator</th>
<th>Intended Audience</th>
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<tbody>
<tr>
<td><strong>Resources to Help Parents and Other Caregivers Talk to their Children About Race and Racism</strong></td>
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<tr>
<td>Race Today:</td>
<td><a href="https://modules.ilabs.uw.edu/module/race-today-what-kids-know-as-they-grow/">https://modules.ilabs.uw.edu/module/race-today-what-kids-know-as-they-grow/</a></td>
<td>The Learning Modules website provides two online modules that will help parents and other caregivers: 1.) &quot;learn how children form racial identities and understandings.&quot;</td>
<td>The University of Washington, Institute for Learning and Brain Science</td>
<td>Parents and other caregivers of young children</td>
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<tr>
<td>&quot;Racing&quot; Toward Equality: Why Talking to Your Kids About Race is Good for Everyone</td>
<td><a href="https://modules.ilabs.uw.edu/module/racing-towards-equality-why-talking-to-your-kids-about-race-is-good-for-everyone">https://modules.ilabs.uw.edu/module/racing-towards-equality-why-talking-to-your-kids-about-race-is-good-for-everyone</a></td>
<td>&quot;learn how to talk to children about race and why these conversations are important.&quot;</td>
<td>The University of Washington, Institute for Learning and Brain Science</td>
<td>Parents and other caregivers of young children</td>
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<tr>
<td>RESilience,</td>
<td><a href="https://www.apa.org/res">https://www.apa.org/res</a></td>
<td>&quot;The RESilience Initiative [provides] resources to parents and others to assist them in promoting strength, health, and well-being among youth of color. Positive racial identities serve as protective factors and bolster resilience.&quot;</td>
<td>American Psychological Association</td>
<td>Parents and other caregivers of children from 3-18 years old, especially of youth of color. Currently, the materials primarily address the African American Community, but there are plans to expand to include materials for other racial/ethnic groups.</td>
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<tr>
<td>Uplifting Youth Through Healthy Communication About Race</td>
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<tr>
<td>Talking to Young Children About Race and Racism</td>
<td><a href="https://www.pbs.org/parents/talking-about-racism">https://www.pbs.org/parents/talking-about-racism</a></td>
<td>&quot;Tips and resources to help [parents and caregivers] have a meaningful conversation with young children about race, racism, and being anti-racist.&quot;</td>
<td>PBS KIDS</td>
<td>Parents and other caregivers of young children</td>
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Table 2: Online resources for learning about race, racism, and anti-racist work and talking to children about these topics

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<tr>
<th>Name</th>
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<tbody>
<tr>
<td>Resources to Help Parents and Other Caregivers Find Children's Books</td>
<td><a href="https://www.commonsensemedia.org/lists/books-with-characters-of-color">https://www.commonsensemedia.org/lists/books-with-characters-of-color</a></td>
<td>a list of books that &quot;promote diversity and inclusion and teach readers about different cultures. And on top of that, they offer tons of positive roles [sic] models, especially for kids of color.&quot;</td>
<td>Common Sense Media, a nonprofit organization whose mission is to provide technology and entertainment recommendations to parents, caregivers, and educators. Also conducts advocacy work around protecting consumer privacy and increased internet access and holding &quot;tech companies accountable to ensure a healthy internet for all.&quot;</td>
<td>Parents and other caregivers, librarians, and educators looking for books for children of all ages</td>
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<tr>
<td>Books with Characters of Color</td>
<td><a href="https://www.commonsensemedia.org/lists/books-about-racism-and-social-justice">https://www.commonsensemedia.org/lists/books-about-racism-and-social-justice</a></td>
<td>a list of books that &quot;tell stories of people's experiences of racism and of those who put their bodies on the line for the cause of equality under the law and social justice.&quot;</td>
<td>Parents and other caregivers, librarians, and educators looking for books for children of all ages</td>
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<tr>
<td>Books About Racism and Social Justice</td>
<td><a href="https://www.commonsensemedia.org/lists/books-about-racism-and-social-justice">https://www.commonsensemedia.org/lists/books-about-racism-and-social-justice</a></td>
<td>a list of books that &quot;tell stories of people's experiences of racism and of those who put their bodies on the line for the cause of equality under the law and social justice.&quot;</td>
<td>Parents and other caregivers, librarians, and educators looking for books for children of all ages</td>
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<tr>
<td>Diverse Book Finder</td>
<td><a href="https://diversebookfinder.org/">https://diversebookfinder.org/</a></td>
<td>&quot;The Diverse BookFinder is a comprehensive collection of children's picture books featuring Black and Indigenous people and People of Color (BIPOC). [They have] cataloged and analyzed trade picture books fitting this criteria [sic], published since 2002, to surface and create: a unique circulating collection, a search tool, and a source of critical data.&quot;</td>
<td>Faculty and students from Bates College and a children's book author</td>
<td>Parents and other caregivers, librarians, and educators looking for books for children in grades K-3</td>
</tr>
<tr>
<td>Where to Find Diverse Books</td>
<td><a href="https://diversebooks.org/resources-old/where-to-find-diverse-books/">https://diversebooks.org/resources-old/where-to-find-diverse-books/</a></td>
<td>&quot;A list of websites that offer recommendations for diverse titles. [The] list is not exhaustive.&quot;</td>
<td>We Need Diverse Books, a non-profit whose mission is to help children find and access books with diverse characters founded and run by a team that includes children's book authors, educators, and librarians.</td>
<td>Parents and other caregivers, librarians, and educators looking for books for children of all ages</td>
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<tr>
<td>Name</td>
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<td>Resources to Help Adults and Adolescents Better Understand Race, Racism, and Anti-racist Work</td>
<td><a href="https://implicit.harvard.edu/implicit/takeatest.html">https://implicit.harvard.edu/implicit/takeatest.html</a></td>
<td>This website consists of Implicit Association Tests that provide &quot;the opportunity to assess conscious and unconscious preferences for over 90 different topics... and [contribute to] psychological research on thoughts and feelings.&quot;</td>
<td>Project Implicit is a non-profit organization and international collaboration between researchers who are interested in implicit social cognition - thoughts and feelings outside of conscious awareness and control. The goal of the organization is to educate the public about hidden biases.</td>
<td>All teens and adults</td>
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<td>Racial Equity Tools</td>
<td><a href="https://www.racialequitytools.org/">https://www.racialequitytools.org/</a></td>
<td>This website offers &quot;tools, research, tips, curricula, and ideas for people who want to increase their own understanding and to help those working for racial justice at every level – in systems, organizations, communities, and the culture at large.&quot;</td>
<td>Racial Equity Tools was created when three websites merged: racialequitytools.org/, evaluationtoolsforracialequity.org, racialequitylearning.org.</td>
<td>All teens and adults</td>
</tr>
<tr>
<td>Resources to Better Understand Race, Racism, and Policing</td>
<td><a href="https://news.ucr.edu/articles/2020/06/09/resources-better-understand-race-racism-and-policing">https://news.ucr.edu/articles/2020/06/09/resources-better-understand-race-racism-and-policing</a></td>
<td>&quot;In the wake of the tragic death of George Floyd in Minneapolis police custody, we asked faculty and staff members at the University of California, Riverside, who study race, racism, policing, and incarceration to offer their recommendations for resources to learn more about these issues in the U.S. The following list of media — which will be updated on an ongoing basis to reflect new submissions — so far features the input of 10 members of the UCR community.&quot;</td>
<td>10 members of the University of California, Riverside community, including faculty, graduate students, and researchers.</td>
<td>All teens and adults</td>
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IMPLICATIONS FOR EXTENSION

Nationally, Family and Consumer Science Extension programs cover an array of topics such as child development, trauma-informed care, parenting, developing coping skills, and healthy relationships. However, in our experience Extension programming often does not address race and racism. As racial injustice is discussed more frequently in the media and the communities Extension serves, this topic is particularly relevant. It is important that Extension programming recognizes the experiences that parents and children have around race and racism in order to make more meaningful impacts.

Our hope is that the table of resources provided in this article will help Extension professionals discuss race and racism throughout their communities. The online resources listed in Table 2 can be used by Extension professionals for their own edification or shared with community members. Additionally, the relevance criteria and the five credibility criteria, outlined in Table 1 can be used to evaluate the quality of any online resource. These criteria can be used by both Extension professionals and shared with the public to identify credible sources for information on any topic.

CALL TO ACTION

It is an obligation as Extension professionals to be aware of, and respond to, the needs and concerns of the communities we serve (National Institute of Food and Agriculture). Our response should go beyond thoughtful program design and recruitment to include the dissemination of unbiased research and resources about anti-racism. We should strive to create learning environments that allow our participants to feel protected and support them in bravely sharing their experiences. Creating a community of safety and inclusivity is dependent on open and truthful communication about matters that profoundly impact individuals such as discrimination, race, and bias.
Innovative Approaches to Health and Wellness: Intuitive Eating and Mindful Eating

Dieting and exercise regimens are arguably unsustainable and may result in physical and psychological ramifications. Professionals are exploring innovative approaches (i.e., Intuitive Eating (IE) and mindful eating (ME)), which focus on physiological cues and respecting one’s body within public health strategies. Limited Extension programming focuses on these approaches. Key informant interviews (n = 12) revealed whether Southern Maryland’s communities would be open to learning about IE and ME. Informants identified barriers to using these approaches with vulnerable populations and cultural subgroups. Educators should consider alternative strategies to increase receptivity and become well-versed in these approaches to ensure accurate education.
A common tactic for combating chronic diseases is to promote balanced nutrition and physical activity. Adults often practice these behaviors in the form of specialized diets and exercise regimens with an overall focus on weight loss. Despite these practices, 60% of Americans live with at least one chronic disease (Centers for Disease Control and Prevention, 2021). Supporters of innovative approaches to health and wellness claim rigid dietary control is unsustainable and may result in physical and psychological ramifications, such as unhealthy dietary intakes, increased risk of disordered eating, and poor body image (Camilleri et al., 2017; Linardon & Mitchell, 2017). New approaches to health and wellness teach individuals to allow hunger, fullness, and satisfaction cues to dictate when and how much to eat, to find enjoyable movement, and to respect one's body and health. Two of these approaches, Intuitive Eating (IE) and mindful eating (ME), may have potential benefits on dietary intake, physical health indicators other than BMI (e.g., blood pressure, blood glucose, cholesterol), disordered eating, self-esteem, and body image when used within public health strategies (Camilleri et al., 2017; Clifford et al., 2015; Dyke & Drinkwater, 2013; Linardon & Mitchell, 2017).

**IMPLICATIONS FOR EXTENSION**

**Erin Jewell**

Data collection and analysis were conducted in Southern Maryland through the University of Maryland Extension.

**Purpose**

There are limited Extension programs focusing on these two innovative approaches. 4-H educators utilized ME as a minor component within larger mindfulness programs (Lewis et al., 2020; Vetter-Smith et al., 2014). Otherwise, there is a deficit for comprehensive Extension programs centered around ME and IE, especially within Family and Consumer Sciences. Extension Educators who work with audiences at risk for dieting, poor body image, and disordered eating should consider IE and ME in their approaches to promote health and wellbeing. It is also important to assess community receptivity to these unfamiliar topics. Therefore, I conducted key informant interviews to see if Southern Maryland's communities would be open to learning more about these innovative approaches.

**BACKGROUND**

I received approval from University of Maryland's Institutional Review Board to conduct key informant interviews in three of Southern Maryland's counties. Inclusion criteria were that (a) informants be 18 years of age or older; (b) their organization had to reside in and serve one or more of the tri-counties; and (c) they needed to be familiar with community residents' needs. Prior to their scheduled interview, I asked participants to complete a survey containing demographic questions about their organization and the audiences they served. Individual key informant interviews lasted between 30-60 minutes. To answer the research question, “Is Southern Maryland open to new approaches related to health and wellness (i.e., Intuitive Eating and mindful eating)?” I asked informants the three questions listed below. I provided interviewees with a
Have you heard of the movement called Intuitive Eating?
Have you heard of the term called mindful eating?
Does your organization feel [NAME] County’s communities would be interested in learning more about this topic?

**RESULTS**

Of the 12 key informants who participated in this study, 10 completed the pre-demographic survey. For sector type, eight indicated their organization fit within the public sector, one within the private sector, and one chose not to answer this question. Nine informants responded that their organizations were not-for profit, while one chose not to answer this question. The 10 informants reported their organizations provided services for all ages (i.e., <18, 18-64, and 65+).

Informants were prompted to choose a category which best described their organizations’ activities or services. Responses included “Health Services” (n = 4), “Academic or Educational” (n = 2), “None of these apply” (n = 2), “Farming and Food Systems” (n = 1), and “Sports, Athletic, Recreational, and Social” (n = 1).

During their interview, several key informants expressed positive responses to the questions on IE and ME. Five informants felt Southern Maryland’s communities would be interested in learning about these topics. Four informants openly expressed their organizations’ promotional support or personal interest in learning more. One informant commented that IE addresses the need to explore connections between behavioral health, emotional development, and nutrition. Informants also voiced the importance of these approaches in addressing chronic disease (e.g., obesity) and helping people listen to their bodies’ nutritional needs. Despite this positive feedback, the majority of key informants were uncertain if IE and ME were applicable or would be of interest to specific community groups.

The majority of informants voiced concerns that subsets of the community might not be open to IE or ME (n = 7 and n = 8, respectively). Two informants stated that individuals may be unwilling to give up their favorite taboo foods in exchange for healthier alternatives. Other informants indicated IE and ME were inappropriate for low-income populations who lack access to or are unable to afford healthy foods. Informants also expressed concerns that cultural subgroups might be unreceptive to these programs. They suggested using alternative marketing strategies and stressed the importance of building trust and collaborating with respected leaders and peers to gain acceptance. Key informants reported that younger, educationally advanced, higher income, and holistically focused audiences would be more open to these types of programs.

Table 2 provides example quotations of key informants’ concerns, support, and suggestions regarding community receptivity of IE and ME. It is important to consider these responses and suggestions when developing programs related to these topics.

**DISCUSSION**

The following are implications for educators interested in offering IE and ME in their communities. It is imperative educators seek credible professional development opportunities to become well-versed in IE and ME before implementing these approaches in their programming (The Center for Mindful Eating, n.d.-b; Tribole & Resch, 2019). This will help educators avoid promoting these as new dieting tools and guide educators on how to educate communities to utilize these approaches with foods considered taboo. For example, IE discourages individuals from labeling foods as “good” or “bad” and only choosing foods for their health properties. Individuals can also practice ME with foods considered unhealthy. Therefore, educators should seek in-depth training to be able to appropriately educate communities and combat misconceptions.

Further training could provide answers on how to adapt IE and ME messages or program components to meet the needs of vulnerable populations. Remley (2017) discussed how individuals experiencing food insecurity may use coping skills (i.e., eating a small variety of unhealthy foods and binging when food is abundant) to avoid hunger. These individuals may benefit from learning how to practice ME with accessible foods (even those considered unhealthy). Individuals experiencing food insecurity may not be able to participate fully in specific principles of IE (e.g., honoring hunger, fullness, and health using gentle nutrition). However, individuals could practice other aspects (e.g., respecting their bodies and coping with emotions without using food).

Key informants reported specific audiences may be
more receptive to these two approaches. Educators may be successful implementing IE and ME programs with audiences who are younger, more educationally advanced, have higher incomes, and those holistically focused. Consider exploring opportunities on college or university campuses working with nutrition or health organizations. For educators who work with other populations, key informants made suggestions for how to improve receptivity among these groups.

Educators should consider alternative marketing or delivery strategies to improve receptivity for other subsets of their communities. For example, use familiar or appealing terms in titles and highlight that IE and ME utilize inherent skills rather than learning something new. Also, consider embedding IE and ME messages into existing programs (e.g., to promote physical activity, help participants discover movement they enjoy rather than prescribing regimens or activities). When targeting cultural subgroups, reach out through respected leaders and peers while building trust in communities. It may also benefit educators to recruit leaders or peers to become trained in and promote these approaches.

Having the support of community partners opens up opportunities to collaborate on programs or train community leaders to incorporate IE and ME messaging in their field of work and communities. Many key informants offered their support or suggestions for how to make this type of programming successful. However, despite providing definitions of IE and ME, some responses indicated key informants still held misconceptions about these approaches. For example, key informant 005 said, “... some folks really just want to eat the fried foods and don’t want to participate in anything that might make them have to change their ways of life that they enjoy whether or not it’s good for them.” Key informant 006 said, “I know I like doughnuts. I know I’ll overeat doughnuts ... So maybe less on like and more on ‘what healthy options do you pick for yourself that you like.’” Both of these responses convey that IE and ME do not allow an individual to enjoy foods labeled “unhealthy” (i.e., fried foods and doughnuts), which is not true. While practicing mindful eating, a person can use all five of their senses to eat a doughnut, notice if it is satisfying, and become aware of how it affects their hunger or fullness. When becoming an Intuitive Eater, a person grants themselves permission to eat forbidden foods, find satisfaction and pleasure in the eating experience, and to reject food rules which diet culture has created (Tribole & Resch, 2020). One of IE’s last principles is to introduce gentle nutrition, but this is often taught later in this process so that individuals do not use IE as a new diet tool. Tribole and Resch (2020), the founders of IE, would argue that undoing the “diet mentality” takes time and practice. Because IE and ME are unconventional compared to traditional methods of approaching nutrition and health, it may take time for community partners to understand, accept, and endorse these approaches.

For educators who are interested in offering IE and ME programs or embedding messages in existing programs, I hope that my experience provides them with insight on some next steps to consider. I encourage those who question these new methods to seek answers through credible sources to avoid false information. It is important educators understand that traditional methods of approaching nutrition and health—especially those that are diet and weight focused—do not always factor in the human experience (e.g., food preferences and dislikes, coping strategies, busy schedules, adopting realistic practices, natural/biological changes in the body). IE and ME are revolutionary and disrupt traditional approaches which are unsustainable and inconsistent. Franz and Cox (2012) might agree that Extension should explore these disruptive innovations to enhance our organization’s relevance and sustainability, increase our competitive advantage, and to survive complex markets. We have the opportunity to stay ahead of the curve and teach people how to get back in touch with their bodies, find joy in the eating and drinking experience, and finally promote a balanced approach to overall health and wellbeing.

You may click here to access the references, tables, and graphs for this article.
COVID-19 Messaging Campaigns Show Impact and Reach Through Strong Collaborations

Utah State University Extension reached communities impacted by COVID-19 through collaboration with partners to create and disseminate culturally appropriate physical and mental health messaging. Radio, print, online communication, and local community efforts were used to reach seniors and caregivers, multicultural communities, and those with underlying health conditions living in geographical areas of concern. Results showed reach and engagement of almost three million, and reported positive impacts on awareness, attitudes, and behaviors related to adherence of COVID guidelines. Providing targeted messaging using multiple outlets helped further the state’s health directives to continue improving COVID-related behaviors among vulnerable populations.
In the early months of 2020, physical distancing guidelines encouraged, or required, minimal contact with others to limit spreading the virus. Such guidelines resulted in decreased opportunities for social interaction, which led to unintended impacts on mental and physical health, especially among vulnerable populations.

Utah saw high numbers of infections and deaths due to COVID-19, despite the state’s health directives, and ranked in the top ten nationally for COVID-19 transmission rates in 2020 (Curtis, 2020). The virus disproportionately affected the elderly and caregivers, those with underlying health conditions, and Latino and tribal communities. In fact, a report published in May 2020 shared a finding by the Utah Public Health and Economic Emergency Commission that 76% of those who died had at least one underlying health risk factor and were on average 72.5 years old (Utah Senate, 2020).

Utah’s Latino community represents 14.4% of the population, the second highest demographic after Caucasians (US Census, 2020), but accounted for 37.4% of all COVID-19 cases (Utah Department of Health, 2020). Increased rates of diabetes, obesity, high blood pressure and overall poor health in this population put them at an increased risk of illness and death due to coronavirus (Brandley, 2020). Likewise, tribal communities who experience high rates of diabetes, poor overall physical and mental health, and additional adverse conditions due to unhealthy behaviors such as smoking and binge drinking (i.e., consuming 5 or more drinks in two hours), are at higher risk of serious illness due to COVID (Artiga & Orgera, 2020; American Addiction Centers, 2021). This data mirrored a national Centers for Disease Control and Prevention (CDC) report that indicated racial and ethnic populations were disproportionately afflicted by coronavirus due to factors that included underlying health conditions (Wortham et al., 2020).

Mental health concerns related to the COVID-19 pandemic began to emerge in the summer of 2020 (Harris, 2020; Renner, 2020). According to a national poll conducted in March 2020 by the Kaiser Family Foundation, 45% of adults in the US reported that worry and stress about the virus had negatively impacted their mental health, whereas one in five reported mental health concerns prior to COVID (Panchal et al., 2020). Likewise, the CDC’s Morbidity and Mortality Weekly Report published August 2020 found that among the 11% of respondents who had considered suicide, the highest was among respondents aged 18-24 years, Hispanic respondents, and caregivers, at 25.5%, 18.6%, and 30.7%, respectively (Czeisler et al., 2020).

The State of Utah’s guidance, Utah Leads Together, focused on following safe practices (e.g., wearing masks, limiting social interaction, and self-quarantining when necessary), engaging with the economy, and assisting others (State of Utah, 2020). However, there was minimal culturally
appropriate messaging surrounding details of these recommendations and minimal messaging combating the misinformation refuting the research-based guidance. In addition, there was a lack of culturally appropriate and sensitive messaging in multiple languages to reach Latino and tribal communities.

OBJECTIVES

Utah Leads Together established grants with CARES Act funding to provide additional COVID safety guidance to vulnerable communities, including high-risk populations and caretakers, multicultural communities, and those living in geographical areas of concern, through existing media channels and community partnerships. A multidisciplinary team of Utah State University Extension faculty were awarded one such grant and quickly convened to plan, develop, and deploy messaging campaigns to targeted communities through unique educational and awareness campaigns.

The grant objectives were to improve awareness, attitudes, and behaviors related to COVID-19 guidelines by 1) creating culturally appropriate and relevant material for the target populations and 2) providing health and wellness messaging to mitigate potential isolating effects caused by physical distancing guidelines. The target populations were seniors and caregivers, Latino communities, the Navajo Nation, parents of school-aged youth, those with limited internet access, and the general public within nine counties identified by state health officials as areas of concern due to high transmission rates (Utah Department of Health, 2020). Table 1 provides a demographic breakdown of the target counties.

METHODS

DETERMINING APPROPRIATE MEDIA CHANNELS

To effectively execute the prevention messaging campaigns in 12 weeks (October through December 2020), the team first reviewed published data on proven ways of reaching the targeted audiences. The Pew Research Center has followed social media use in the US since 2005. At the time of the project, social media was shown to be highly accessed by the campaign's target audiences, including among limited income and multicultural communities (Pew Research Center, 2021). Furthermore, a best practices guide published by USU Extension faculty cited findings that information seen on bus ads and read in mailers by similar audiences were highly memorable (Utah State University, 2020). The team concluded that messaging via virtual channels (social media, websites), traditional communication channels (commercial and public radio), and ad positioning in public spaces (bus ads and highway billboards) would be effective outreach strategies. To engage audiences with limited internet access, such as seniors and the Navajo community, flyers, handouts, and other print materials were created and disseminated through community networks.

DEVELOPMENT AND DISSEMINATION OF CREATIVES

The team worked with an external advertising agency to develop messaging materials (creatives) in English and Spanish, which were primarily promoted through online channels. The team also worked with USU Extension's internal marketing staff and community organizations that included NavajoStrong, AmeriCorps Seniors, a state-wide Caregiver Coalition, and five-county Areas on Aging. These groups helped create and adapt print materials written in English, Spanish and Navajo (see Appendix A), and disseminated them through local community efforts, including food distribution events, grocery stores, and voting events.

Messages were themed around Fall and Winter holidays using the tagline “Stay Happy Stay Healthy” (see Appendix B), which was included on all online and print creatives and linked to https://stayhappystayhealthy.usu.edu, a landing page created for the project. The website provided information in English and Spanish for four specific actions: Stay Connected; Take Care of Yourself; Remember COVID-19 Safety, and Build and Maintain a Healthy Immune System, and linked to additional resources for families and professionals.

Creatives were distributed via external social media ads and internal USU social media posts; as clickable banners on premium news websites; as magnets and flyers via aging service programs including Meals on Wheels and the AmeriCorps Seniors network; as magnets and flyers in caregiver wellness packages via a statewide Caregiver Coalition network; as magnet/mask kits, posters, and flyers at food distribution events, grocery stores, regional campus buildings, and food pantries serving Navajo Nation and Latino communities; as posters and masks at an early voting location; as an electronic flyer in a school e-newsletter for parents; via PSA’s on Utah Public Radio and Latino radio stations (see Appendix C); on bus wraps and billboards; and through magnetic mailers and other printed materials.
DATA COLLECTION
Data points on outputs were gathered to report the number of impressions on web-based ads, which include frequency of seeing the ads, social media engagement, percentage of the target population reached, number of flyers and mailers delivered, and listeners of the radio ads.

In addition, a survey using a 5-point Likert-type scale with retrospective-pre-then-post questions was developed in English and Spanish to assess impacts related to the messaging campaigns. Qualtrics® was contracted to disseminate the online survey to a random sample (N = 325) throughout the nine targeted counties. The survey included five qualifying questions, 14 questions with visuals of the messages asking “have you seen this image,” and a Likert-type matrix question on how helpful the messages were in affecting thoughts and actions regarding awareness of COVID-19 concerns, attitude towards COVID-19 safety guidelines and mandates, encouragement to adopt practices to improve emotional and mental health, and encouragement to adopt practices to reduce the risk of COVID-19.

DATA ANALYSIS
Descriptive statistics were used to summarize the self-reported view of each of the 14 creatives and participant demographics. A paired-samples t-test was conducted to determine if there was a significant difference in awareness, attitudes, and behaviors between survey sample participants who had previously seen at least one creative in the community and those who were seeing the creatives for the first time during the survey. Multiple regression was also conducted to control for differences by racial and ethnic background, gender, and county of residence.

RESULTS
Table 2 shows the total estimated reach of social media, online websites, radio, on-the-ground efforts, and community distribution. The billboard creative was in a highly visible area along an interstate route with 2.5 million estimated impressions. Overall, it was estimated that creative reach was just under 3.0 million (excluding billboards).

Survey results indicated that the average number of creative views was 2.4 (SD = 3.0), with views ranging from 0-14 out of a total of 14 possible creatives to view. Most often participants had seen at least one creative (60.3%) prior to the survey. Table 3 shows the demographic distribution of the sample. The age of survey participants varied with participants most often reporting being in the 25-34 age range (27.7%). Finally, 10% (n = 33) of respondents self-identified as Hispanic/Latino.

The results of the independent sample t-tests show that there were significant differences between those who had previously seen at least one of the creative in the community (n = 196) and those who had just seen the creatives for the first time during the survey (n = 129) in two areas. The first was a significant difference in reporting that the creative(s) was/were helpful in impacting their attitude toward COVID-19 safety guidelines and mandates. Respondents who had not viewed any of the creatives prior to the survey had an average response that was significantly lower (μ = 3.36) than those who had seen at least one creative in the community (μ = 3.75; p = 0.01). The second was a significant difference in reporting that the creative(s) was/were helpful in encouraging them to adopt practices to reduce their risk of contracting COVID-19. Respondents who had not viewed any of the creatives prior to the survey had an average response that was significantly lower (μ = 3.40) than those who had seen at least one creative in the community (μ = 3.75; p = 0.03). No additional significant differences in attitudes were found. Regressions were conducted to control for differences by race, gender, or county of residence, however no differences were found.

SUMMARY
The survey data shows that seeing the messages more than once increased positive attitudes toward COVID-19 safety guidelines and encouraged adoption of practices to reduce risk. While we can’t infer how many different creatives respondents were exposed to (i.e., banner, mailer, radio PSA), our pre-assessment helped determine the best forms of media for our target populations. Additionally, the results pointed toward the inclusivity of creatives as there were no differences in creative effects across racial and ethnic backgrounds. An implication for future social marketing or awareness campaigns is to consider multiple types of distribution to increase probability of seeing and internalizing messages by multiple demographic groups.

By collaborating with multiple partners and using the USU Extension system, the team was able to leverage a
variety of methods to disseminate culturally appropriate and effective COVID-19 messages to targeted communities. This method made it possible to affect a positive attitude change surrounding COVID-19 guidelines and mandates. However, there was underrepresentation of some hard-to-reach groups (e.g., Navajo or aging adults) by using online surveys. Future efforts implementation of messaging and surveys could benefit from local persons participating in the dissemination of messaging and recruitment of participants using in-person data collection strategies.

USU Extension's COVID-19 messaging campaign filled a niche as there was a lack of messaging related to mental health, which is presenting itself in various ways, including substance use disorder and suicide. These kinds of unhealthy coping strategies have increased in the months since the pandemic hit, and are considered health challenges that communities may face in the long-term. Addressing these types of concerns early can be beneficial to stakeholders and residents alike.

The unique position of the Cooperative Extension system ensures that research-based programs and resources reach audiences through partnerships with key stakeholders, coalitions, and organizations to meet the needs of the communities in which they serve. With planning and coordination, communities can tap into their local resources to reach audiences in similarly innovative ways.
Food, Fun and Reading is a curriculum for early education children. Originally developed by University of Vermont Extension, Utah SNAP-Ed gained permission to update it to reflect 2015-2020 USDA Dietary Guidelines. Food, Fun and Reading was pilot tested in eight Utah counties. Based on feedback from nutrition educators who taught the lessons, changes were made following the pilot. After completing the lessons, parents reported their children talking about and eating more healthy foods. Parents also reported preparing a greater number of healthy foods. Using insight gained through pilot testing Food, Fun and Reading was finalized and implemented statewide.
According to the National Institutes of Health (2018) the comparison of food intake among U.S. children ages 4–8 years old with the 2010 Dietary Guidelines for Americans indicates that many children are not meeting daily serving recommendations of fruits (39.6% of males; 41.5% of females); vegetables (94.5% of males; 94.8% of females); or whole grains (99.0% of males; 99.7% of females). Children from lower-income families who receive Supplemental Nutrition Assistance Program (SNAP) benefits may have less healthy dietary patterns than children from higher socioeconomic households (Andreyeva, Tripp, & Schwartz, 2015). Evidence suggests that eating patterns remain somewhat consistent between childhood and adolescence, lending support for the need to promote healthy eating patterns early in life (Ambrosini et al, 2014).

Murimi et al. (2018) found that nutrition education programs for youth of all ages may be more effective when they include developmentally appropriate activities and hands-on learning components. This format may be even more important for interventions targeting preschool students. Hands-on activities that reinforce nutrition education lessons for preschool students may include reading stories, acting out plays or skits, providing sensory experiences such as taste tests, and playing interactive games.

Reading illustrated stories to preschool-aged children can help focus their attention and prompt better retention of the information presented (Greenhoot et al, 14). Gripshover & Markman (2013) found that using storybooks and age-appropriate activities resulted in an increase in the child’s knowledge of nutrition and their intake of vegetables at snack time.

The purpose of the study reported here was to pilot test the effectiveness and feasibility of an updated and revised nutrition and physical activity education curriculum which uses children’s books to teach about healthy eating and nutrition. A pilot study was conducted to evaluate changes in children’s knowledge of the MyPlate food groups and eating behavior following program participation. Additionally, nutrition educators who taught the program provided qualitative feedback regarding program feasibility.

**BEST PRACTICES**

**Darlene Christensen, MS, Brittany Bingeman, MS, RD, CD, Mateja R. Savoie Roskos, PhD, MPH, RD, CD, CNP, Heidi LeBlanc, MS, and Casey Coombs, MS, RD**

Food, Fun and Reading was originally developed in 1998 by the University of Vermont Extension. With permission, Utah State University Extension expanded upon and updated the program to reflect the 2015 - 2020 USDA Dietary Guidelines. Pilot testing allowed for the study of program effectiveness and feasibility of the curriculum. Limiting the number of counties that taught Food, Fun and Reading in the pilot phase allowed for the opportunity to evaluate survey instruments as well as program delivery options before implementing...
DID YOU KNOW?
on a larger statewide scale. The pilot study also provided the opportunity to evaluate changes in children’s knowledge of the MyPlate food groups, and their eating behaviors following program participation. Another objective of pilot testing was to gain insight and feedback from nutrition educators regarding program content, delivery method and survey instrument dissemination prior to finalizing the Food, Fun and Reading curriculum. The parent and child surveys were approved by Utah State University’s Internal Review Board.

BACKGROUND

Eight counties pilot tested the Food, Fun and Reading program. Some counties taught the program more than once. Paraprofessional nutrition educators taught 13 program series with an estimated 452 youth who participated during a three-month pilot period. Six lessons were taught as a series. Lessons included MyPlate, Grains, Dairy, Fruits, Vegetables, and Protein. Using USDA MyPlate guidelines, the lessons were taught by 1) reading a related children’s storybook, 2) talking about MyPlate food groups in an interactive way, 3) making a healthy snack, and 4) doing a fun physical activity. For example, the Grains lesson starts with 1) reading The Little Red Hen; 2) talking about whole grains using a large interactive board that has bran and grain parts that can be removed and replaced; 3) dancing the The Little Red Hen chicken dance with chicken dance music and large poster with pictures of children showing the steps and 4) making and enjoying either a whole grains snack mix or whole wheat tortillas.

Handouts reinforcing the nutrition concepts for each lesson were sent home with children. These included:

- a letter describing what the child learned in class
- USDA 10 Tips information sheet (related to food group covered)
- activity sheet for the child to complete at home
- recipe card incorporating ingredients from the food group for parents to try at home.

The target audience included children in preschool through first grade in areas where SNAP-eligible participants resided, or at least 50% of the population was at or below 185% of the federal poverty level. Program locations included public libraries, community and recreation centers, and county Extension offices. Parents had the option of staying for lessons in some locations.

Parents were asked to complete a retrospective post-then-pre survey after their child finished the sixth class, either via a paper-based or an online survey. In this optional survey, parents were asked to rate how often their child talked about and ate healthy foods from the MyPlate food groups and how often they prepared healthy foods prior to and after their child attended the program. Participants responded to the retrospective post-then-pre questions using a 5-point Likert scale ranging from 1 (never) to 5 (always). The parent survey also asked parents to provide demographic information about their child and to answer questions about the food security status of the household. Additionally, pre/post surveys were distributed to children for them to complete at the first and last sessions. Using pictures as a guide, children were asked to identify which foods fit into certain food groups.

FINDINGS

NUTRITION EDUCATOR FEEDBACK

The primary purpose of the pilot study was to test the usefulness and effectiveness of the updated and expanded curriculum. Qualitative feedback from nutrition educators who taught the lessons was essential. Giving those who are “on the front line” a chance to give suggestions and advice was not only helpful in program design and delivery, but it also gave nutrition educators ownership and buy-in to the curriculum they were teaching. One nutrition educator wrote in her end-of-year review “Thank you for giving me the chance to tell you what worked and what didn't with Food, Fun and Reading. Knowing you care about me and that if I think a lesson is good makes me feel important.”

Nutrition educator feedback generally indicated that lessons were feasible to implement at various teaching locations and the cost of snack foods and materials was within the provided SNAP-Ed budget. Feedback regarding the children’s books indicated that some books were too long for a young child’s attention span. Several nutrition educators provided suggestions on how to engage children while reading such as adding motions to go with the story or asking children to name their favorite foods from the food group highlighted in the story.

Regarding the nutrition education lesson content,
DID YOU KNOW?

Nutrition educators indicated that some of the concepts included in lessons were too advanced for young students. For other lessons, it was reported that the lessons were too short, and more nutrition education content needed to be included. Specifically, nutrition educators requested content that includes a hands-on component, such as a matching game, to reinforce concepts.

Nutrition educators indicated that some of the physical activities were too advanced for children in this age range, particularly competing in a relay game or performing certain physical activity motions in response to verbal or written prompts.

As a result of feedback gathered from nutrition educators, the authors revised and updated the curriculum. Based on comments regarding the children’s books, a section was added in the curriculum entitled “Tips to Engage Children While Reading,” incorporating suggestions to engage youth. For certain books, suggestions of pages to skip without diminishing the content of the story were provided. The nutrition education portion of certain lessons was also updated based on nutrition educator feedback. For example, a more straightforward visual of whole grain with removable parts was created. Additional content and visuals were added to reinforce nutrition concepts in the vegetable group and fruit group, which nutrition educators commented were too short, such as a rainbow with color-coordinating vegetables to represent choosing a variety of colors from this food group. Suggestions were added to certain lessons of how to modify physical activities for younger children, such as directing children to hold an item rather than try to balance it during a relay and prompting them to do circular arm motions rather than jumping jacks. As a result of feedback on the difficulty of recipe preparation for a snack in the protein lesson, a third recipe option of turkey and cheese stacks was included.

PARENT SURVEYS

Parent surveys proved more effective and useful than youth surveys. Individual retrospective post-then-pre-parent answers were compared using a Wilcoxon Signed Rank Test. As shown in Table 1, the majority of parental responses came from parents of white female children who were from 3-4 years of age. Nearly one-third of parents indicated that they worried or stressed about having enough money for nutritious meals either some of the months or all the months in the past 12 months. As shown in Table 2, results indicated a statistically significant increase in the frequency of children talking about healthy foods from the MyPlate food groups and in the consumption of vegetables, whole grains, and lean protein after participating in the program lessons (p < 0.05). There was also a statistically significant increase in parents preparing healthy foods from the MyPlate food groups after program participation (p < 0.05). Table 2 includes the medians, means, and p-values for the seven post-then-pre-questions from the parent survey.
The pilot study proved to be a necessary step and a valuable way to gather insight into the effectiveness and age-appropriateness of the program curriculum prior to implementing it statewide. Specifically, the ineffectiveness of youth surveys resulted in the removal of that evaluation tool. Being able to do so prior to statewide programming eliminated possible frustration by nutrition paraprofessionals attempting to collect pre-posttests. The pilot study identified the difficulty in distributing and collecting youth surveys as well as indicating the results were not usable. The pilot study results were promising yet the small sample size (31) of parent surveys is a limitation. Research through parent surveys will continue with a larger sample size as the Food, Fun and Reading program continues statewide in Utah.

*Food, Fun and Reading* is available free of charge at www.foodfunreading.usu.edu. Each lesson includes 1) lesson guide; 2) parent letter; 3) parent handout; 4) recipe card; 5) kids take-home activity sheet; 6) additional posters or activity cards.

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Best Practice Food Safety Standard Operating Procedures for Share Tables Can Reduce Food Waste While Improving Food Security During COVID-19 and Beyond

This paper summarizes rules, regulations, and best practices of share table food safety practices in schools to decrease food waste and increase food security and reviews current policies to develop best practices for share tables Standard Operating Procedures (SOPs). Out of 18 SOPs reviewed a majority 38.8% (7 states) were guidelines, followed by 27.7% were regulation and guidance (5 states), 16.6% guidance (3 states), 11.1% were regulation and guideline (2 states), and only 1 of 18 (5.5%) was regulation. Best practices include collecting input from parents, using proper/clear signage, and educating school faculty on share table procedures.
Approximately 41 million people in America are food insecure, a number that includes about 13 million children (USDA, 2017). Feeding America projects an exacerbation of the issue with an additional 4 million people who will face food insecurity due to the pandemic (Feeding America, 2021). Despite the prevalence of food insecurity, an astounding 40% of America’s food supply is wasted every year (NRDC, 2017), costing $161 billion annually (Buzby et al., 2014). Food waste in the U.S. has been increasing at an alarming rate, with Americans wasting 50% more than they did in the 1970s (Hall et al., 2009).

In 2015, the United States Department of Agriculture (USDA) and United States Environmental Protection Agency (EPA) collaborated to create the first ever national goal of reducing food waste by 50% by the year 2030 (EPA, 2015). Many states have created policies that support this national food waste reduction goal. The New Jersey Department of Environmental Protection (NJDEP) created a “sector-based approach” implementation plan to support this goal (NJDEP, 2017). This includes the publication of a K-12 Food Waste Reduction Guide that encourages strategies such as composting, anaerobic digestion and share table use (NJDEP, 2019).

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Share tables are a designated place in the lunchroom where students can place unopened food and beverages they do not wish to consume. They are relatively simple to set up and are low or no-cost solutions to reducing waste and increasing food insecurity (USDA, 2016). Share table food may be used as snacks for after school programs or sports practices, or even donated to local food pantries or soup kitchens. According to one study that analyzed plate waste from 46 schools across nine cities in eight states, on average each school wasted approximately 39.2 pounds of food per student per year (WWF, 2019). Based on this figure, schools in the U.S. waste about 530,000 food tons per year. Thus, K-12 schools are a crucial area of focus for to reducing food waste. Furthermore, for the more than 30 million students participating in the National School Lunch Program (NSLP) and more than 14 million students participating in the School Breakfast Program (SBP), increased food consumption and decreased food waste helps children get the adequate nutrition they need to thrive in school and life (USDA, 2017). Share tables can serve as a great opportunity for Family and Consumer Sciences (FCS) Educators to provide food waste education and support food insecurity reduction efforts.

**PURPOSE**

Share table regulations and guidance allow for FCS educators to focus on promoting Health in All Policies (HiAP) because share tables can help reduce food insecurity, hunger and help provide adequate nutrition to food insecure individuals (CDC, 2018). The purpose of this best practice article is to describe food safety practices when FCS Educators are implementing share tables. The USDA supports and encourages the use of share tables in child nutrition programs that utilize...
the National School Lunch Program (USDA, 2016). School leaders may be fearful of potential liability from donating food; however, the federal Bill Emerson Good Samaritan Act (42 U.S. Code § 1791) protects against liability for these types of donations (USDA, 1997). Schools that want to donate food must follow proper food safety practices. Unfortunately, many states have little guidance on how to safely organize, execute, and monitor share tables in schools while maintaining proper food safety.

BACKGROUND

LITERATURE REVIEW
A previous research study has assessed state-level share table policies in all 50 U.S. states and Washington DC K-12 schools in the Spring and Summer of 2018 (Prescott et al., 2020). According to that study, only 54% of states had any guidance on food safety practices of share tables. The collected policies were reviewed for 11 key share table characteristics: health code, standard operating procedure (SOP), identifying items, critical limits, monitoring, corrective actions, record keeping, establishing reuse/redistribution plan, marketing and outreach, allergy considerations and unique ideas. Out of the 50 states, the research found that 6 states, provided an SOP, 3 states required an SOP, 5 states recommend an SOP, 13 states provided a guidance document, and the remaining 23 states have no policy document regarding share table food safety (Prescott et al., 2020). Building on that study, eighteen state policies found online were reviewed for the following: department of origin, legislative level, incentive, and best practices. The SOPs recommended in this paper were developed from an extensive review of the policies from these 18 states.

DEPARTMENT OF ORIGIN
Thirteen of the 18 (72.2%) share table policies originated in each state’s department education whether it was in conjunction with the inspections and appeals authority or another health or nutrition agency within the state. The breakdown for the department of origin can be found in Table 1.

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LEGISLATIVE LEVEL
Legislative level was identified by how SOPs addressed state regulations and guidance on those regulations and were sorted into 5 categories (regulation and guidance, regulation and guideline, regulation, guidance, and guideline). A regulation is a specific regulatory citation/provision, while a guidance is either a statement of internal policy or an explanation of the interpretation/application of a regulation. Lastly, a guideline is an extension of guidance. Out of 18 SOPs reviewed a majority 38.8% (7 states) were guidelines, followed by 27.7% were regulation and guidance (5 states), 16.6% guidance (3 states), 11.1% were regulation and guideline (2 states), and only 1 of 18 (5.5%) was regulation. The breakdown for the legislative level can be found in Figure 1.

INCENTIVES
Incentives were measured by how the standard operating procedures were framed when trying to incentivize their use. Common incentives included reducing food waste 55.6% of SOPs or 10 of 18 states, food safety 27.8% of SOPs or 5 of 18 states, food recovery 5.5% of SOPs or 1 of 18 states, working with food banks 5.5% of SOPs or 1 of 18 states, and a combination of reducing food waste and promoting food safety 5.5% of SOPs or 1 of 18 states.

BEST PRACTICES
When comparing the components of the standard operating procedures, all states reviewed had a list for allowable food and beverages, and 4 of 18 (22.2%) states had a section on best practices. Some best practices compiled after a review of the 18 SOP’s include the following:

Notification and Outreach
1. Communicate to parents informing them of the capability of the share table.
2. Request input from parents and guardians to ensure families are comfortable with their children participating in the share table.
3. Communicate allergy information, indicate that students with allergies should not take food from the share table as items from the share table may contain ingredients containing allergens or have been handled by a student who had contact with an allergen. If a student is unable to manage, it is the responsibility of those supervising the students in the cafeteria. Some states (CO and IA) suggest keeping share table items separate from allergens to prevent cross contact and provide training to those students.

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monitoring the share table to protect students with allergies.

**Liability**
1. Ensure school board approval with accepting the liability of any food borne illness due to the sharing of food and ensure that the share table does not conflict with policies and procedures pertaining to food allergies.
2. Ensure the share table follows local and state health department regulations.

**Share Table Design**
1. Clearly identify items allowed and not allowed to be shared on SOP.
2. Keep share table items separated by food group to prevent cross-contamination.
3. Signage must be posted to notify students of the purpose of the share table, share table procedures and allowable foods.

**Share Table Maintenance**
1. Do not mix ready to eat items with items that have not yet been prepared and served.
2. Include explicit instructions to discard any out-of-date items “When in doubt, throw it out”.
3. Regularly educate and train teachers, principals and other school staff on share table policies and procedures.
4. Provide times and temperatures in SOPs for critical control points.
5. Designate a point person for monitoring times and temperatures of the share table and location of record keeping documents.
6. Proper monitoring including strict time and temperature controls should be documented.
7. Identify corrective actions that need to be taken if share table items are compromised through poor time and temperature control.
8. Identify use of share table items correctly handled, whether redistribution to lunch program, redistribution to school program such as afterschool programs or athletics, or external donation.

**COVID-19 Considerations**
Standard Operating Practices should include the following considerations for COVID-19 safety:
1. Reinforce hand washing policy; students and staff must wash hands prior to handling or consuming food to avoid pathogens from spreading.
2. Share table food must be washed prior to redistribution or sharing.
3. Only Individually wrapped items or whole produce items with thick inedible peels may be shared.
4. Medically vulnerable populations should not partake in the share table.
5. Social distancing and wearing face masks must be followed when dropping off items to the share table.

**Overall Food Waste Reduction Strategies**
Several more food waste reduction strategies were identified as being effective in reducing food waste. For example, Iowa’s SOP stated the need for food service departments to consider alternate production strategies to reduce food waste at the source. Additionally, Offer vs. Serve (OVS) reduces excess food waste on lunch trays and allow students to only take foods they plan to eat, while still allowing for a reimbursable meal option in National School Lunch and School Breakfast Programs. Finally, school staff should educate students about the share table in a way that does not pressure students to donate foods from their meal while ensuring students do not bully or exert undue influence on other students to donate their food. All these added measures make an impact on a reduction in food waste.
SUMMARY

With such a high amount of food waste produced in schools and a great need for food security post-pandemic, share tables can be an important intervention impacting both issues. While reviewing 18 SOPs throughout the country we have found there are best practices any share table SOP should consider before implementation. Elements of food safety planning, maintenance and communication have been highlighted in this manuscript as best practices. In sum, Family and Consumer Sciences Extension professionals can play an integral role in ensuring that share table practices meet food safety considerations while effectively reducing food waste and increasing food security to those in need.

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You may click here to access the references, tables, and graphs for this article.
Organizing Extension Family and Consumer Sciences Groups Around a Common Topic: Lessons Learned and Best Practices

For over 100 years, Extension and land-grant universities have been providing researched-based, practical information to individuals and families in local communities. The changing environment within the Extension Service and the communities they serve have created a need for networking beyond state boundaries. Using an established regional Extension network, this study interviewed its members to uncover successes and challenges of combining resources across states and universities. The interviews' resulting themes showed that regional networks meet their communication and sustainability challenges while making a greater impact on Extension programming by sharing resources and evaluation efforts.
In 2016, the North Central Region (NCR) Extension program leaders in Family and Consumer Sciences (FCS) convened state specialists and field staff in Chicago, Illinois. The NCR includes twelve states (Illinois, Indiana, Iowa, Kansas, Michigan, Minnesota, Missouri, Nebraska, North Dakota, Ohio, South Dakota, and Wisconsin). Groups within the region were organized around key FCS topics, including food safety, aging, and several others. One group organized around consumer food safety education with a focus on home food preservation. The food safety group eventually developed a standardized evaluation tool (Garden-Robinson et al., 2019). In 2020, the consumer food safety education group officially adopted the name: North Central Food Safety Extension Network (NCFSEN), after the current study took place.

Extension professionals often are tasked with an ever-increasing need for research-based information with decreasing resources. To maximize the effect of Extension programs and allow for sharing of material across state lines, organizing into professional communities is a viable solution. According to Young (2018) of Utah State University, “[t]he new norm for extension [sic] includes smaller budgets, fewer individuals tasked with greater job duties, and rapidly changing clientele wants and needs” (p. 281). This “new norm” has evolved into the dissolution of geographical boundaries to meet these rapidly changing needs, especially in lieu of the current pandemic and its impact on food safety issues.

Research of Extension Professional Associations, or EPAs (Thomas et. al, 2018), showed how formal, professional-development-based groups operate and what we can learn from them. Some of the common themes that came out of this qualitative study were strong “networking and connection” as well as “value,” “motivation,” and “recruitment” (pp. 1-2). Further, a multi-university Extension program utilized in the Gulf of Mexico states responded to clients' questions after the Deepwater Horizon Spill (Sempier et. al, 2018). The program team used peer-reviewed research results and an Extension specialist from each of the four universities involved in their institution's Sea Grant programs. The grant specifically outlined the “spectrum of oil spill-related topics, allowing for delivery of multidisciplinary Extension programming” (p. 2).

Finally, a report from the University of Minnesota highlighted how Extension professionals use “the art and science of networking” to reach expanded audiences by developing leaders and facilitators. The authors of the Minnesota report emphasize how networking is poised to function more expediently in the future, involving the Internet and social media platforms already well established (Harden et al., 2020). The literature reviewed exemplifies the exponential power of combining resources across state and university lines. More research is needed to understand the potential of regional networks in sustaining and
The purpose of this study was to use the experience of a regional Extension consumer food safety education network to explore the nature and operation of a collaborative, regional Extension network. Our objectives were 1) to achieve an in-depth understanding of the successes and roadblocks that members of a network may encounter, and 2) to uncover nuanced responses that might inform other Extension professionals how to establish their own networks using best practices.

**DATA ANALYSIS**

The Extension assistant completed the coding of responses using the identification of common themes, then developing simple phrases to represent them as they appeared throughout the transcripts (Ulin et al., 2005). Two response themes emerged that were not a part of the initial question categories, and these were coded separately as Points of Interest (POIs) (see Table 2, bottom). Although the questions were scripted, they were asked in the manner of conversational dialogue. The questions were sometimes asked verbatim and sometimes modified slightly to elicit responses and facilitate communication between interviewer and participant (participant=Network member).

The Network’s email list provided the pool of potential participants. Invitations and scheduling were completed using the privacy setting on Doodle. Out of 17 members (at the time, more have since joined), 11 volunteered to be interviewed. At a 65% sample, we believe this was representative because the most active members were interviewed. Network members ranged from new Extension specialists and educators to highly experienced Extension professionals, some nearing retirement. Interviews were conducted and recorded over Zoom during two weeks in June 2020 and ranged from 27 to 52 minutes in length. Recordings were downloaded and transcribed using iTunes.

The last three of six question categories elicited information about audience interests (Food Safety Topics), how the Network communicates and makes decisions (Communication), and how members currently sustain the Network and operate moving forward (Change). Within these question categories were two sub-categories. The first three of six question categories dealt with the background of Network members (Professional Development), target audience and program format (Program Development), and the effects of these first two categories (Program Impact). Each question category was divided into three sub-categories. These sets of questions and their sub-categories allowed the interviewer to probe Network members' backgrounds and experiences. They could be thought of as 'where we've been' (see Table 1, first and second columns).

Interview questions were organized into six logical categories using standardized, open-ended questions, which allowed for more flexible responses while reducing interviewer bias (Ulin et al., 2005). These standardized questions were informed by a previous study done by another NCR network focused on the topic of aging (Bates, et al., 2020). The first three of six question categories dealt with the background of Network members (Professional Development), target audience and program format (Program Development), and the effects of these first two categories (Program Impact). Each question category was divided into three sub-categories. These sets of questions and their sub-categories allowed the interviewer to probe Network members' backgrounds and experiences. They could be thought of as 'where we've been' (see Table 1, first and second columns).
RESULTS

Three to five response themes emerged within each of the question categories and sub-categories of ‘Where We’ve Been’ and ‘Where We’re Going’ (see Tables 1 and 2, third columns). The following results and discussion are organized around the major question categories with a description of how the transcripts resulted in the response themes. Sample quotes pulled from the data are provided as examples.

PROFESSIONAL DEVELOPMENT

The first question category, Professional Development, contained three sub-categories: Motivation, Impact, and Mentoring. Out of the responses coded in Motivation, three response themes emerged: helping others, personal fulfillment, and overcoming ignorance. These three themes were developed from individual coded phrases within the interview transcripts. For example, from the ‘helping others’ response theme, the variety of answers given by participants were coded within the transcripts using the following phrases: facilitating safe food for all, helping colleagues perform better, helping clients directly, sharing a passion with others, preventing people from getting sick, improving health, and more. From the ‘personal fulfillment’ response theme, some of the coded phrases were: job description, personal health impact, personal satisfaction, personal passion, lifelong interest/involvement, and more. From the ‘overcoming ignorance’ response theme, some of the example phrases coded were: home v. business food safety, medical diagnosis and diet, the “I’m still alive” syndrome, canning without previous preparation, the Internet, and more. These detailed coded phrases are just one example taken from the first question sub-category of Motivation.

The coded phrases that resulted in the response themes in the third column of Tables 1 and 2 were developed from the variety of descriptions given by participants. To exemplify the richness of responses, some quotes that correlate with the response themes above are given here to illustrate. From the code phrase ‘safe food for all’ in the ‘helping others’ response theme above, a quote was: “just to help them to have safe food for themselves and their family.” From the code phrase ‘personal passion’ in the ‘personal fulfillment’ response theme, a quote was: “I’ve always had a real strong passion and desire to make sure that folks know what they are doing [and] how they’re doing it is the right way, because it could be a matter of life or death.” From the code phrase “I’m still alive” syndrome in the ‘overcoming ignorance’ response theme, a quote was: “So I think now all the [moms] out there in the world who have this opinion that ‘I haven’t hurt anybody...this works; it’s easier than what you’re telling me to do.’”

In the Impact sub-category, the response theme of working together, three code phrases found in the data stood out: networking, sharing resources, and problem-solving. The response theme of ‘results achieved’ emerged from the code phases national award and evaluation tool. In the Mentoring sub-category, the response theme of ‘mutual mentorship’ emerged from code phrases including: shared mentorship, mutual collaboration, and mutual mentorship going both ways. Some participants indicated a need for mentorship by such quotes as “need mentorship for new people” and “need for mentorship for those who don’t have it at state level.”

PROGRAM DEVELOPMENT AND IMPACT

The Program Development question category had the sub-category of Audiences, their Problems, and Solutions applied, as shown in the second column of Table 1. The Program Impact question category yielded many comments about the evaluation tool (Garden-Robinson et al., 2019) that the NCR Food Safety Team (the Network’s name at the time) developed and implemented in the Assessment (sub-category) of their programs. The State Impact sub-category elicited how the team’s work impacted the individual members’ state-level programs since it was formed.

The previous three question categories, taken together, show where we’ve been on the Professional Development of individual members, and the Program Development and Impact of the work they’ve accomplished to date. As shown in Table 2, interviews then explored ‘where we’re going’ through Food Safety Topics, Communication and Change as the Network positions itself to the future.

FOOD SAFETY TOPICS

In the Food Safety Topics question category, interviewees revealed their Biggest Issue in food safety along with New Topics to be explored as well as the Role team members would like to play in developing those topics. As may be expected, COVID was coded for many of the answers. ‘Overcoming ignorance’ was also frequently found as a response theme, corresponding to coded phrases such as Internet, family and friends’ influence, always done it that way, and education/equipment in the transcribed interviews.
COMMUNICATION

The Communication question category delivered response themes in the sub-categories of Decision-Making and Improving Communication. Response themes in making decisions for the team included ‘general – why the team works’ and ‘specific actions employed.’ Some of the coded phrases from this set of data were: automatic consensus, group is voluntary, diplomacy, consideration of others, and mutual respect. Collaborative problem solving, a commonly coded phrase in Professional Development/Impact (Table 1), also appeared frequently in the Decision-Making question topic. Some of the ‘specific actions employed’ had coded phrases: monthly meetings, use of agenda, and smaller breakout groups. In the Improving Communication sub-category, response themes were for ‘what works,’ ‘what needs work,’ and ‘no improvements needed.’ “Continued leadership that encourages participation” and “don’t force advice” were some shorter quotes, and “getting to know each other better,” “learning names and backgrounds,” “having less verbal people do more talking,” “don’t have rolling agenda items,” and “get a secretary,” were quote fragments for areas of improvement.

CHANGE

In the Change question category, sub-category Longevity, response themes emerged dealing with how long team members think the group will last and why, with answers falling into the response themes of ‘changing membership’ and ‘cautions and needs.’ For example, some coded phrases were: replace retirees and open membership, Network members need stronger roles, not using talented membership effectively, revolving leadership needed, and refocus topics. The Goals/Planning sub-category aimed at finding out if the team had goals and if they needed a strategic plan.

Some responses had general ideas about change, and some had specific action items; there were varying opinions on whether or not a strategic plan was needed. Examples of coded phrases from the data included: share information and education topics don’t change with time, and in the case of strategic planning (SP), coded phrases and quotes revealed “SP yes, for ongoing leadership and financial sustainability;” and “SP yes with caution: takes a lot of work, and time away from practical work that is intrinsic to Extension professionals;” while at the same time coded phrases and quotes appeared stating “SP no, too formal; informalness creates group cohesiveness,” and “SP no; wastes time in development and implementation, if implementation ever happens;” with one “SP maybe; we’re already doing quite well without one.”

EXTRAS

Finally, the Extras question category yielded basic Final Comments that were summaries or re-emphasizing points made earlier in the interview. The POIs emerged as response themes that stood on their own, outside of where they appeared in the transcribed interviews. The first POI pertains to organizational obstacles and emerged from the following coded phrases: new hires have a wide variety of expertise, so may not perform to expectations; lack of administrative support; and radical restructuring of state Extension programs (cuts). Others noted that over the last ten years new hires have less and less food preservation experience, fewer Extension agents that have a good food science background, and most have only nutrition backgrounds. Some participants noted obstacles created by the current level of funding, amount of time currently available from the National Center for Home Food Preservation, and a need at their state level to utilize their Extension personnel in a more focused way (such as having one person focused on food preservation) instead of all personnel touching on all topic areas. The other POI response theme pertained to the trend of other professional organizations tending to tap Network members for information or referral; for example, one answer reflected that Poison Control refers some of their questions to Network members for authoritative answers.

DISCUSSION

Consumer food safety and home food preservation information developed by the U.S. Department of Agriculture has been disseminated in communities for more than 100 years (National Center for Home Food Preservation, n.d.). Fostering networks that extend beyond county and state lines can enhance Extension’s visibility and foster a greater impact. This qualitative evaluation of a regional team’s successful food safety efforts highlighted the value of a network that stretched beyond state boundaries, and it provides original research on which other Extension groups might form new networks and provide future research on professional collaboration. Analysis revealed common themes that have served as the “glue” holding the network together. Helping others, working on general and specific initiatives in Extension priority areas, enacting shared decision-making, having regular communication, fostering mutual mentorship, and creating evaluation tools to showcase state and regional impacts are highlights of this five-year network.
Authors of this article, except for Rebecca West, were some of the interviewees in the study and their responses were included in the data collection. Triangulation of data was performed by outsourced assistant Pamela Leino-Mills, whom we gratefully acknowledge.
Testing Multiple Educational Delivery Methods with Rural Audiences: Lessons Learned

Exploring alternative educational means to reach rural audiences and adapting to the increased use of technology may benefit educators. University of Maryland Extension Educators compared four educational delivery methods using Dining with Diabetes Session 1 components. The purpose of this article is to report lessons learned and recommendations for recruiting, implementing, and collecting data for the following methods: 1) Face-to-Face, 2) Online, 3) Hybrid (combination of face-to-face and online methods), and 4) Written Information Only. Despite challenges arising during each phase of this study, 43% of eligible participants fully participated, indicating educators have multiple effective options for reaching rural audiences.
People living in sparsely populated, rural areas are more likely to have chronic health issues (e.g., diabetes and obesity) than those living in suburban/urban areas (Lundeen et al., 2018; Centers for Disease Control and Prevention, 2017). The Maryland Rural Health Association (2018) identified health education programs as a priority for improving health behaviors. However, reaching rural audiences via traditional face-to-face programming has been challenging for Extension Educators. Reported barriers included lack of transportation, excessive travel time, distance, and insufficient space to implement programs (Rural Health Information Hub, 2018). Technology offers opportunities to reach existing communities as well as new populations (DePheps et al., 2019; Raison, 2014). Barton et al. (2017) found that facilitating distance education systems using various online platforms was successful with Extension audiences. Therefore, learning how to translate health information to virtual platforms is valuable for Extension educators, especially for those working with difficult to reach rural audiences.

To expand programming efforts in rural areas beyond traditional methods, our team conducted a study to test the ease of implementation, accessibility, and community engagement for four program delivery methods (Barber et al., 2020). We used Session 1 of Dining with Diabetes, a national evidence-based program series developed by West Virginia University Extension (Griffie et al., 2018). Session 1 included two components: diabetes self-management information and a cooking demonstration. The purpose of this article is to report lessons learned and recommendations for recruiting, implementing, and collecting data for four educational delivery method groups: 1) Face-to-Face, 2) Online, 3) Hybrid (combination of online and face-to-face methods), and 4) Written Information Only.

Five educators aimed to recruit approximately 400 participants in 13 rural counties using flyers, social media, newsletters, word of mouth, and local partners. Individuals had to be at least 18 years old, reside within the 13 rural counties, have internet access at home or through a public site (e.g., library or work), and be willing to travel. Participants were screened for eligibility via an online survey software (i.e., Qualtrics) or directly by phone. Educators offered incentives of $20 in cash or a gift card to those who participated in their randomly assigned group and completed both pre- and post-surveys. Those who met these criteria and completed the follow-up survey were eligible to win one of two iPads. We allotted six to eight weeks to recruit and screen participants.
The 173 eligible participants were randomly assigned to the Face-to-Face (n = 42), Online (n = 45), Hybrid (n = 43), and Written Information Only (n = 43) groups. Educators implemented all four methods simultaneously. For Face-to-Face and Hybrid groups, educators chose easily accessible locations and offered multiple dates for in-person components. Some educators with smaller Face-to-Face and Hybrid groups offered in-person cooking demonstrations to both groups at the same time. For Online and Hybrid groups’ online components, educators used the Canvas online class platform as it was convenient and free for university employees. The Written Information Only group received copies of the presentation and recipe via email or mail, depending on participants’ preferences.

Of the 173 eligible participants, 49% (n = 84) completed the pre-survey and 43% (n = 75) completed the two components and post-survey. The nine participants who did not fully complete their components or post-survey came from the Written Information Only (n = 4), Hybrid (n = 3), and Online (n = 2) groups. Percent satisfaction and ease of accessing in-person and/or online components for Face-to-Face, Online, and Hybrid groups are displayed in Table 2. The majority of Face-to-Face and Hybrid participants reported the site scheduled for in-person components was “easy” or “very easy” to access and were “satisfied” or “very satisfied” with their in-person components. The majority of Online and Hybrid participants also reported it was “easy” or “very easy” to log into their Canvas course and were “satisfied” or “very satisfied” with their online components. Thirty-seven percent of Written Information Only participants expressed interest in taking a future class. Of those interested, 43% preferred online, 14% preferred hybrid, and 43% preferred face-to-face educational delivery methods. The Improving the Rural Health of Maryland: Testing Online Nutrition Education Programs report contains more in-depth results for this project (Barber et al., 2020).
DISCUSSION

RECRUITMENT
Educators used multiple methods to recruit for this study. The most successful recruitment strategy was to advertise through community partners and Facebook, which aligns with other research (Krusche et al., 2014). Although social media provided an opportunity to broaden our recruitment efforts, internet robots and fake accounts responded to this marketing strategy. Therefore, we recommend utilizing multi-level authentication steps for program registration (e.g., security questions or authentication codes via email/texts).

To reduce user and instructional barriers for online components, we strongly recommend allotting additional time to research, develop, and test online enrollment/platform features. During online Canvas course registration, we discovered non-university participants were required to set up a temporary university account to access the course platform. This added extra steps for both participants and educators, delayed the course start date, and created frustration for both parties. Consider using reputable Massive Open Online Course platforms such as EDx or Coursera to minimize user frustration. Canvas also lacked features allowing educators to monitor participant progress (e.g., tracking video views) and assign separate Hybrid and Online group components (e.g., the cooking video would be visible to Hybrid participants), which led us to create two courses. The course platform that suits your program’s needs may not be the most convenient or affordable option.

During initial project planning, the PI took a leave of absence from the project and did not have a detailed transition plan in place. This required adjustments to the timeline and acclimation to newly delegated responsibilities. Also, eligibility screening, assigning groups, and relaying group protocols took more time than expected. CREd Library and Singletary (2014) recommend allowing two to three months for recruitment if a comprehensive plan is in place to account for critical steps in recruitment planning, implementing, and recovering from shortfalls in numbers. We agree with these recommendations, especially if delivering four methods of education simultaneously.

During the screening process, those who were unwilling to travel (n = 24) elected not to participate in the study. Therefore, those who participated were willing to travel if randomly assigned to a group with an in-person component (i.e., diabetes self-management instruction and cooking demonstration). These results support the need for Extension educators to explore offering hybrid or online programs and creatively engaging communities when delivering written information only.

IMPLEMENTATION
In order to reduce barriers for attending in-person components, our implementation recommendations include choosing easily accessible locations, scheduling multiple sessions, or scheduling shared components together. Consider choosing easily accessible locations near a bus route or at popular community sites as this was reported among the majority of Face-to-Face and Hybrid participants.

Offering multiple dates allowed participants options to attend in-person components if they had scheduling conflicts. In this study, educators who scheduled Face-
and mail back paper surveys. Whether sending written information via mail or email, provide incentives to encourage participation in this non-interactive method. Written Information Only participants were equally interested in attending face-to-face (43%) and online (43%) future classes, which indicates educators have options reaching these audiences.

**DATA COLLECTION**
To efficiently collect data for four delivery methods across multiple counties, we recommend creating a thorough protocol. It took time for educators to set up and deliver pre-, post-, and follow-up surveys because of different delivery methods. Educators stored and mailed paper surveys from Written Information Only, Face-to-Face, and Hybrid participants. Electronic versions of the surveys were either created through Qualtrics or embedded within the Online and Hybrid groups’ Canvas courses. Post-surveys also contained group specific questions, which made it critical for educators to ensure the correct group had access to their designated post-survey. While implementing the project, the team realized a more detailed written protocol would have made things more efficient, consistent, and alleviated the need to contact the PI with questions while they were on a leave of absence.

**CONCLUSION**
If considering any of the four methods for delivering education described above, we hope our experience provides you some strategies for offering an efficient and successful program in your communities. We conducted this study prior to the COVID-19 pandemic, which has changed the way educators are teaching. Whether offering in-person or online programming, many of these recommendations apply and should be considered to reach new audiences.

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**Author’s note:** Virginia Brown is now at the Office of Learning and Organizational Development, University of Georgia. We have no known conflict of interest to disclose. Data was collected in 13 counties across the state of Maryland.
Providing education through videos is a widely used tool for Cooperative Extension professionals. Across the nutrition and dietetics field, including Extension research, best practices to guide the development, use, and evaluation of recipe demonstration videos are limited. This article identifies best practices in the literature and combines these with experiences from Extension professionals who create recipe demonstration videos. These practices can help guide current and future professionals.
Cooperative Extension is an early adapter of video technology for educational activities. More than thirty years ago, Florell & Nugent (1985) described using videodiscs for “Self-Learning Centers’ located in Extension offices…” or to “…bring specific Extension programming directly into the home” (Implications for Extension section). A decade later, Beaudin & Quick (1996) noted, “…Extension agents strongly recommended videos be used in… [agriculture] education programs…” (para. 1).

In the new millennium, Extension professionals described the importance of video technologies to support a wide variety of educational programs and topics (Case & Hino, 2010; Cone, 2013; Dev et al., 2018; Epley, 2014; Kinsey & Henneman, 2011; Kinsey, 2010; Kinsey, 2011; Kinsey, 2012; Langworthy, 2017; Lindsay, 2010; Mills & Hawkins, 2015; Parish & Karisch, 2013; Powell et al., 2008; Rice, 2014; Sutherin, 2015; Thompson, 2018; Thompson et al., 2018; Waitrovich et al., 2018; Waterman & Laramee, 2018).

On January 26, 2021, a Boolean search in a popular internet search engine for ‘recipe videos’ OR ‘cooking videos’ yielded nearly 18 million results. When narrowed to educational institution websites ending in .edu, there were 4,130 search results. Despite the immense volume of recipe demonstration videos available online, little research to-date has been conducted on developing or evaluating recipe demonstration videos for Extension audiences.

**BEST PRACTICES**

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**PURPOSE**

The purpose of this article is to provide best practice recommendations around the development, use, and evaluation of nutrition and food safety recipe demonstration videos.

**BACKGROUND**

Within the nutrition and dietetics field, the literature on recipe demonstration videos is limited. As described in Table 1, existing studies explored viewers’ preferences of video length (Danforth et al., 2012), gains in nutrition knowledge (Danforth et al., 2012), acceptability of videos, such as video quality or being interesting to watch (Hyder et al., 2009; Fortmeyer, 2018), intention to make a recipe after watching videos (Hyder et al., 2009; Fitz et al., 2017; Fortmeyer, 2018), or being able to demonstrate skills shown in videos (Mechling & Gustafson, 2009; Mechling et al., 2013).

The only Extension-specific research describing and evaluating recipe demonstration videos to-date is from Hutchings & Hoffman (2019). They used Facebook Groups to present live, 15-minute lessons that included recipe demonstrations. The live lessons were recorded for participants to watch at a later time. In their evaluation data, around 85% of participants reported making recipes that were presented during the lessons.
GENERAL VIDEO PRODUCTION
BEST PRACTICES

The following are best practices for video production based on the literature around video topics, length, production value, and evaluation.

TOPIC ASSESSMENT
Prior to filming videos, researchers recommended assessing topics of interest, such as a topic that is unique to a specific region or state (Cone, 2013), gaps in knowledge or skills based on needs assessments (Dev et al., 2018), analytics such as Google Trends (Parish & Karisch, 2013), or where Extension is not currently represented in video form (Parish & Karisch, 2013).

LENGTH
Most researchers produced videos that were five minutes or shorter in length (Case & Hino, 2010; Fitz et al., 2017; Kinsey & Henneman, 2011; Ramsay et al., 2012; Thompson, 2018), with other videos between five and twelve minutes (Langworthy, 2017; Mills & Hawkins, 2015). Only one study evaluated video length. Among videos between two and eleven and a half minutes, participants preferred videos between four to six minutes in length (Danforth et al., 2012).

PRODUCTION VALUE
To add production value, researchers suggested incorporating music, still photos or graphics, and B roll footage (Case & Hino, 2010; Epley, 2014; Kinsey & Henneman, 2011). For videos with audio information, captions should be added to meet accessibility needs or designed so the video can be watched without sound (Thompson, 2018; Waitrovich et al., 2018). Branding, such as the name and logo of the Extension institution that produced the video, should be included as well (Thompson, 2018).

EVALUATION
Evaluation of videos has been primarily based on number of video views (Case & Hino, 2010; Epley, 2014; Franzen-Castle & Henneman, 2012; Kinsey & Henneman, 2011; Kinsey, 2010; Kinsey, 2011; Mills & Hawkins, 2015; Rice, 2014; Langworthy, 2017; Sutherin et al., 2015; Waitrovich et al., 2018) or social media shares and engagement (Langworthy, 2017).

FINDINGS
To determine the development, use, and evaluation of recipe demonstration videos among current Extension Family and Consumer Sciences (FACS) professionals, a multistate team of Extension professionals developed and distributed a survey via Qualtrics through the National Extension Association of Family and Consumer Sciences (NEAFCS) Facebook page and several state affiliate listservs. Fifty Extension professionals completed the survey, representing seventeen states within the United States.

SURVEY DEMOGRAPHICS
Among respondents, more than half (52%) served as Family and Consumer Sciences (FACS) Agents/Educators, 14% as 4-H Youth Development Agents/Educators, and 10% as Supplemental Nutrition Assistance Program Education (SNAP-Ed) or Expanded Food and Nutrition Education Program (EFNEP) professionals. The remaining professionals (24%) reported serving multiple roles in FACS, 4-H, SNAP-Ed, and/or EFNEP, or reported other roles (Table 2). Sixty-eight percent of respondents reported that they began recording food demonstrations in 2020 due to the COVID-19 pandemic, while 18% reported filming videos both prior to and during the COVID-19 pandemic.

Respondents reported serving rural areas (54%), urban areas (18%), suburban areas (8%), or identified another service area (12%). Most respondents (78%) served one or two counties, with 16% serving three to four counties, and 6% serving regions of five or more counties. More than half of respondents (54%) reported being employed with Extension for two to ten years, with 34% working for more than ten years, and 12% working less than 2 years (Table 2).

VIDEO DEVELOPMENT, EDITING, AND APPLICATION
When creating videos, a majority (57%) of respondents stated that they produced their own video content. Thirty-four percent (34%) recorded videos and utilized a program assistant, intern, or another person to edit the videos. Video filming and editing were professionally done by media specialist teams or a local production company for the remaining 9% of respondents.

Respondents used a variety of editing software including iMovie (22%), Adobe (22%), WeVideo (11%),
Camtasia (4%), and PowerDirector (2%). The remaining 39% of respondents used another software or reported not editing at all.

Extension professionals reported use of webcams, tripods, laptops, Apple-branded phones and tablets, Samsung-branded products, cameras, and video conferencing software, such as Zoom. Additional equipment included ring lights, microphone clips, and camera stands.

Nearly half (47%) of respondents noted that recipe demonstration videos were included as part of another program. Twenty-nine percent (29%) of respondents stated videos were sometimes part of another program, and 24% of professionals made videos to be standalone.

VIDEO RECIPES AND FOOD SAFETY
Of the 38 professionals who shared which recipes they used in videos, more than half (58%) reported using recipes from at least two sources. Recipe sources were mixed: 26% of respondents reported using recipes pre-established through their state Extension resources, 15% used SNAP-Ed recipes, 14% used original recipes, 11% used recipes from pre-existing programs, 10% used recipes from MyPlate.gov, 8% used recipes from diabetes programs, 2% used EFNEP recipes, and 14% reported using other recipe sources.

Within food demonstration videos, 66% of respondents reported including food safety information throughout their video presentation, whether stated verbally in videos or demonstrated. The most common food safety skills mentioned by respondents were hand washing, taking internal food temperatures, avoiding cross contamination, washing produce, and knife safety.

VIDEO EVALUATION
Thirty-six (72%) survey respondents shared how they captured audience engagement on food demonstration videos. Most often, respondents used social media analytics, such as comments, likes, and shares. Other methods included paper or digital evaluations or feedback during live demonstrations, such as polls.

Only 38% (n=18) of all survey respondents reported knowing if the recipes in their food demonstration videos had been subsequently made by video viewers, based on a variety of metrics including comments and feedback from program participants, video comments, program survey evaluations, and visual observation by the Agent or Educator during live, virtual programs where participants had cameras on.

BEST PRACTICES
From the Qualtrics survey, Extension professionals offered their best practice recommendations for both live and recorded recipe demonstration videos in regards to set-up, filming, and editing video content.
SETTING UP FOR FILMING
Many professionals advised preparing in advance, including setting up cooking, filming, and lighting equipment and gathering ingredients. Several professionals recommended testing equipment in advance, making sure camera and audio work, and practicing the demonstration before filming to gauge speed of talking or hand movements. Others recommended gathering items to add visual interest to the video, such as background decorations, colorful placemats and dishware, wood cutting boards, and extra ingredients for garnish or decoration of the final recipe. For the person that will be on camera, several professionals suggested creating a professional appearance, such as wearing Extension-branded clothing and tying back hair.

FILMING DEMONSTRATIONS
Survey respondents recommended choosing recipes that are visually interesting and use healthy ingredients that are both available and affordable. Additionally, they suggested modelling food safety practices for viewers. While filming speaking roles, it was recommended to set up a microphone to capture sound and speak clearly and slowly.

For live, filmed recipe demonstrations, professionals recommended knowing the recipe well, measuring ingredients in advance, keeping notes nearby, having talking points to fill silences while foods are cooking, incorporating audience engagement, and having a final product ready to show.

When filming a pre-recorded video, professionals recommended filming each step individually and filming all recipe steps, noting that videos can be edited later to remove excess film and condense steps as needed. Filming B-roll, such as moving a plate of food on or off camera or showing a utensil lifting some food from the final plate, adds interest in the final edit.

Professionals noted that videos will vary in length and format based on the needs of the demonstration, whether a hands-only demonstration, face-on-camera demonstration, or a mix of the two. For hands-only, professionals recommended a top-down camera angle, and for face-on-camera demonstrations, face the camera head-on.

EDITING DEMONSTRATIONS
If video editing is needed, professionals recommended practicing with the software to get comfortable. Professionals recommended incorporating accessibility into videos, such as adding on-screen text showing ingredient amounts, cook times, and equipment, using closed captioning for spoken audio, and allowing ample time for text on screen to be read.

Professionals also recommended adding royalty-free background music for recipes that do not have spoken audio. Other content may be necessary to add depending on requirements or policies from the university or county; these may include Extension logos, equal opportunity statements, compliance statements, disclaimers, and other needed language.

STRENGTHS AND LIMITATIONS
A strength of this article is the combination of published literature with in-the-field experiences to help create a more complete picture of best practices. The survey of Extension professionals reached a wide number of individuals from many areas of the country. A limitation of the survey was that it did not include representation from every state Extension service.

RECOMMENDATIONS FOR FUTURE RESEARCH
A practice not addressed in the literature or by professionals who completed the survey was incorporating diversity, such as persons of color being represented in videos or use of culturally relevant foods among certain regions of the country. One professional who responded to the survey recommended the best practice of translating videos into other languages. Future research could explore how diversity in recipe demonstration videos impacts a viewer’s knowledge, skills, or behavior.

The aforementioned literature did not address nutritional values of recipes in demonstration videos. Research on videos that model nutritious foods and meals may serve as a tool to help individuals with or at risk for chronic conditions, make healthier food choices and improve their health status would be useful for future implementation.
SUMMARY

Although literature in nutrition and dietetics and Extension are limited regarding best practices to guide development, use, and evaluation of recipe demonstration videos, many Extension professionals have filmed live and recorded demonstrations and have gained knowledge and skills through their experiences.

You may click here to access the references, tables, and graphs for this article.
Social marketing in Supplemental Nutrition Assistance Program Education (SNAP-Ed) programs may enhance circulation of evidence-based guidelines and has potential to change communities and promote healthy living. Idaho’s SNAP-Ed program worked with the Idaho Healthy Eating Active Living Network and 43 community partners to promote “Long Live Idaho!,” a campaign targeting parents and caregivers of young children. The 5-2-1-Almost None messages were delivered through print posters, social media, radio ads, and billboards. Lessons learned about development, implementation, evaluation, and efficacy of a social media campaign provide insight into best practices and recommendations for future campaigns.
The Centers for Disease Control and Prevention (CDC) has defined health marketing as “creating, communicating, and delivering health information and interventions using consumer-centered and science-based strategies to protect and promote the health of diverse populations” (Bernhardt, 2006). Marketing can be used to improve the environment of our communities in evidence-based ways. Using social marketing techniques to improve targeted distribution of evidence-based guidelines may contribute to positive environmental changes and facilitate healthy behaviors among a specific target audience (Maibach et al., 2006). The Supplemental Nutrition Assistance Program Education (SNAP-Ed) has the capacity to use social marketing to reinforce health messages and provide widespread exposure through SNAP-Ed community partner networks.

Idaho’s Healthy Eating Active Living (HEAL) Network assembled a taskforce in 2015 to develop standardized health messages to reach low-income parents and caregivers of young children across Idaho and promote healthy diet and physical activity behaviors. This group was led by Eat Smart Idaho, a University of Idaho Extension program funded in part by the USDA SNAP-Ed. SNAP-Ed uses evidence-based programming to teach audiences with low-resources the importance of a healthy diet and physical activity. Eat Smart Idaho's overall programming has been reviewed and determined exempt by the University of Idaho Institutional Review Board (IRB#14-322). Eat Smart Idaho contracted with third party marketing agencies to develop and evaluate the Long Live Idaho campaign and received de-identified or summary data only. All human subject protections for the data reported in this manuscript were maintained by the marketing agencies. The results of this campaign were previously shared with Idaho stakeholders internally through a University of Idaho Extension Impact Statement (Morrisroe-Aman et al., 2019).

**BEST PRACTICES**

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**PURPOSE**

The objective of this article is to impart lessons learned and experiences gained in developing and evaluating a social marketing campaign for SNAP-Ed audiences. The results from the Long Live Idaho! campaign will be discussed to provide insight into best practices for development, implementation, and evaluation of a SNAP-Ed social marketing campaign.

**BACKGROUND**

Campaign development began with focus groups to develop evidence-based health and wellness messages, designed, and tested for SNAP-Ed audiences. Health behaviors, awareness of the “5-2-1-0 guidelines,” and perceptions and responses to previous social marketing health campaigns were determined via focus groups conducted in 2015 by a third-party marketing agency. Adult participants were recruited from a Head Start center that serves rural migrant families and a Boys and Girls
Club in an urban setting. One focus group was conducted at the Community Council of Idaho among Spanish-speaking participants (n=9). A second focus group was conducted with English-speaking participants (n=9) at a Boys and Girls Club.

The Healthy Lifestyles Messaging committee of the Idaho HEAL Network selected a brand identity and logo, developed by social impact branding agency Idaho, for the campaign. The “Long Live Idaho!” logo was selected and the finalized messaging concepts were based on the “5-2-1-Almost None nutrition and physical activity guidelines for children” (Rogers & Motyka, 2009). The Idaho HEAL committee and Eat Smart Idaho worked together to draft short and long messages to go along with the “5-2-1-Almost None guidelines,” with USDA’s Food and Nutrition Services making small edits and approving the final messages: (5) “Feed your kids a rainbow – Serve 5 fruits and veggies a day;” (2) “Playtime, not screen time – Cut screen time to 2 hours or less a day;” (1) “Kids grow best in motion – Encourage 1 hour of physical activity a day;” (Almost None) “Water is just fine, thanks – Serve water or low-fat milk instead of soda.” Both English and Spanish marketing materials were created, including digital and print artwork, social media posts, roadside billboards (English), and public service announcements (shared on both Tribal and Spanish radio stations). The official launch of the campaign occurred in May 2016 at the “Idaho Public Health, Collaborating for Health Conference.”

Eat Smart Idaho as well as other organizations and agencies who serve SNAP eligible audiences targeted SNAP eligible families and communities, with adults being the primary target and children and community secondary. Sub-groups of the target audience included low-income Hispanic and Native American adults, children, and communities. Federal poverty statistics and census track data were used to identify counties and neighborhoods with high percentages of poverty. Messages were also placed at categorically eligible sites such as WIC, Head Start, schools with 50% or greater free and reduced lunch participation rates, low-income health clinics, community centers, and retail sites that accept SNAP and WIC benefits.

Community organizations and agencies were contacted through the Idaho HEAL network and invited to participate in the campaign by downloading the campaign toolkit and marketing materials available on the Long Live Idaho! website. When downloading the materials, partners agreed to follow the campaign toolkit protocol. This involved a schedule for the roll-out of each message along with a request for reach data to be provided for each message. Several organizations partnered with Eat Smart Idaho to promote the campaign materials, including the Idaho Department of Education, the Idaho WIC office, Idaho Head Start, local Community Action Partnership agencies, Idaho Farmers Market Association, Idaho Department of Health and Welfare, Boys and Girls Clubs, community centers, hospitals, and emergency food pantries.

**FINDINGS**

Partners reported estimated reach numbers quarterly, by responding to an electronic survey administered through Survey Monkey (Survey Monkey Inc., San Mateo, California, USA). No personally identifying information was collected on the survey. Reach was reported by 43 partnering organizations. The first two messages were promoted in Federal Fiscal Year (FFY) 2016. Through print posters, social media and billboards, message 1 (“Feed your kids a rainbow”) reached an estimated 388,141 individuals in FFY2016 quarter three. In FFY2016 quarter four, message 2 (“Play time, not screen time”) reached an estimated 386,596 individuals. Messages 1 and 2 remained displayed in FFY2016, with messages 3 (“Kids grow best in motion”) and 4 (“Water is just fine, thanks”) added and promoted during this period. An estimated 215,717 SNAP-Ed participants were reached by the Long Live Idaho! messages in quarters one and two of FFY2017. The difference in reach between the four messages was attributed to partners not reporting reach on all messages equally. The majority of partners (85%) reported sharing the messages primarily in early childcare facilities and food assistance sites through use of printed materials, including posters, flyers, fact sheets, pamphlets, activity books, banners, postcards, recipe cards, and newsletters.

At the end of the campaign, a third-party marketing firm was contracted to administer online surveys (via Survey Monkey) to partners (n=20) and the target audience (n=55), as well as conduct an in-person focus group (n=5) to evaluate effectiveness of the campaign, participation by partners, and to identify areas of improvement for the next round of the campaign. Additionally, the strength of the HEAL Messaging committee was evaluated using the Levels of Collaboration Scale (1=Networking, 2=Cooperation, 3=Coordination, 4=Coalition, 5=Collaboration) (Frey et
Target audience recognition of the campaign is shown in Table 1. About 40% of the target audience who responded to the survey recognized the campaign images and messages. Of those who recognized the messages, most viewed them on posters at schools, daycares, or health care facilities. Table 2 summarizes the effectiveness of the campaign in reaching the target audience. On average, 52% of respondents agreed that the messages improved their awareness of healthy eating and active living habits for young children. The target audience found the campaign designs attractive (average 52%) and engaging (average 57%). Only about 7% of respondents did not think the campaign designs were effective. One common critique by both partners and the target audience was that the font was difficult to read, and a few respondents had negative responses to the image used in the English “Water is Just Fine, Thanks” and “Play Time, Not Screen Time” posters. Respondents thought the image of a child drinking out of the faucet was messy and did not reinforce lessons about using a cup that were being taught in childcare settings. Respondents felt that the play time image was too affluent and did not resonate well with the target audience. Overall, respondents commented on a need for more diversity in the campaign. However, most respondents said a campaign like this does influence their shopping and nutrition choices, with 95% stating campaigns like this are important.

Personnel capability and time, awareness, and not feeling connected with Eat Smart Idaho were all reasons given by partners who originally signed up for the campaign, but then did not participate. Those who did participate primarily promoted the messages via posters, followed by verbal promotion, social media, and email. When partners were asked how they posted the messages (posters and digital), 46% indicated that they followed the toolkit guidelines and posted one message at a time, 36% hung them all at once, and 9% added messages to the display one at a time, ending with all four displayed.

The partner survey showed that 55% of respondents recalled viewing the campaign billboards and 18% remembered hearing the campaign messages on Spanish radio. Most partners estimated that less than 10% of their clientele saw the campaign and only 10% reported to have observed a reaction to the campaign from their clientele. Partners reported that the “Kids Grow Best in Motion” poster was the most impactful to clientele, with 90% reporting a positive impact, and the “Water is Just Fine, Thanks” poster the least impactful, with 78% reporting a positive impact.

All levels of collaboration were reported among partners, with the average rating falling between cooperation and coordination, indicating partners provided and shared information and resources with one another, had somewhat defined to defined roles, partook in formal and frequent communication, and made independent as well as shared decisions.

DISCUSSION

Lessons learned from the Long Live Idaho campaign can be divided into four areas: media outlets, partnership relationships and protocol, messaging reception, and assessment needs. These lessons learned can then be applied to provide insights into best practices for developing social marketing campaigns for SNAP-Ed audiences.

MEDIA OUTLETS
A marketing assessment conducted prior to development of the campaign identified billboards, posters, and (Spanish) radio as key outlets for reaching our identified target audience. Informal positive feedback was received on the billboards. This was a costly endeavor and challenging to evaluate the impact on the target audience. It was also challenging to identify a Spanish radio station that met the criteria for targeting the SNAP-eligible audience. Evaluation of the billboards and radio spots was not included in the formal evaluation of the campaign.

PARTNERSHIP RELATIONSHIPS AND PROTOCOL
One of the strengths identified in this campaign was the inclusion of multi-sector partnerships. This was identified as one way that strengthened dissemination and increased reach of the messages. However, in surveying partners to identify challenges and successes with displaying the messages, it became clear that the protocol for dissemination and timelines for data gathering had not been communicated clearly. While the protocol was presented up-front, once partners signed up to join the campaign, they were left to implement the project on their own. The project may have benefited from an on-going communication plan to connect regularly with partners and offer technical assistance and support.
MESSAGING RECEPTION
Based on partner and target audience feedback, specific strategies to strengthen the Long Live Idaho! campaign included minor design adjustments, a targeted landing page or website, digital advertising, marketing on Facebook and Instagram, a robust social media and online marketing plan, sharing prompts to facilitate organic social media content, and more options for printed materials. Eat Smart Idaho worked with the Idaho HEAL Messaging Committee to identify three areas (design modifications, website/landing page, and more printed materials) to address with the relaunch of the campaign in Federal Fiscal Year 2019 (FFY19). New graphics were chosen to replace the images that were not well received by the target audience and partners in the FFY17-18 evaluation, a non-cursive font was chosen to improve legibility, and a website was added to posters where the audience can go for more information. Posters were formatted in several different sizes, per feedback from partners.

ASSESSMENT NEEDS
The first round of the Long Live Idaho! campaign achieved the goal of increasing awareness. However, the campaign did not include a call to action, or a landing page for the target audience to go to for more information on how to apply the healthy eating and active living messages. In addition, while reach of the campaign was assessed quarterly, the evaluation of the efficacy of the campaign was not evaluated until well after the campaign ended. Future campaigns should include ongoing assessment of the target audience.

BEST PRACTICES
This article describes one method that other SNAP-Ed implementing agencies can put into practice when developing social marketing campaigns for SNAP-Ed audiences. First, the campaign committee needs to be organized, and the general message topics determined. That topic can be further defined using focus groups and other evaluation methods drawn out of the targeted audience. While focus groups with the target audience were used to develop the Long Live Idaho! campaign, others have found it valuable to also include interviews (Parker et al., 2011) and focus groups with Cooperative Extension Agents (Hagues et al., 2018).

As is best practice for all SNAP-Ed programming, when developing a social marketing campaign, it is important to have evidenced-based messages, designed and tested for a specific audience. Conducting focus groups with the target audience can help to ensure that the types of images and messaging text will resonate with the audience. In contrast to other social marketing campaigns, which utilized shock value and negative messaging (Puhl et al., 2013), it was important to USDA Food and Nutrition Services and to our Idaho HEAL Committee to focus this campaign on positive messages and images. This was also the driving factor behind changing the 5-2-1-0 previously used to 5-2-1-Almost None. It is important for SNAP-Ed programs and researchers to consider using positive messages and images in their programming and research.

During the campaign development period, a specific protocol should be developed for partners to follow, to ensure the messaging given out through partners aligns with the specific message language as defined by the campaign. This includes a plan to clearly communicate the protocol with the partners at the launch of the campaign as well as a plan for ongoing communication with partners throughout the implementation and evaluation of the messages. Gaining partner buy-in at the beginning is key in being able to provide feedback on efficacy and cost effectiveness to the funding agency.

Once the partner protocol and messages have been developed, the implementation of message dissemination can begin. Throughout the implementation period, continued and frequent communication with the partners can help to ensure protocol is being followed and program fidelity is maintained. Regular communication can also be used to facilitate continual evaluation of the messaging campaign. Continual evaluation should include assessing reach and perceptions of the target audience as well as to assess behavior change or application of the messages by the target audience, such as intercept interviews. Others have had success in utilizing telephone interviews to assess behavior change of SNAP recipients in response to a multilevel media intervention promoting low-fat milk (Finnell & John, 2018). To improve chances of positive behavior change, implementing agencies should consider layering messaging campaigns with other educational programming (Dunneram & Jeewon, 2015) as well as having a website/landing page where participants can go for more tips on applying the social marketing messages. After a pre-determined time, messages should be re-evaluated to determine if they are meeting...
the desired needs, modify as needed, and re-implement the new modifications.

The integration of a social marketing campaign into SNAP-Ed programming is an effective way to reach SNAP eligible audiences as it allows extensive exposure to healthy messages and reinforces those behaviors to promote positive behavior changes. Lessons learned about the development, implementation, evaluation, and efficacy of Long Live Idaho! may assist in the future development of social marketing campaigns designed to reach SNAP-Ed audiences. The strength of multi sector partnerships as well as an open and ready mindset to adjust campaign visuals for better reception were identified. Protocol for dissemination and evaluation, a clear timeline to enhance reception, and an ongoing communication plan have been cited as lessons learned. These lessons learned may point to emerging practices to overcome barriers and increase SNAP-Ed program effectiveness to optimize impact.

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Social distancing restrictions imposed in early 2020 due to COVID-19 forced a halt to vital in-person Extension diabetes prevention programs. The Cooperative Extension-National Diabetes Prevention Program working group assisted the transition of member programs to a distance learning format through continuing education on best practices for virtual program delivery and information exchange forums on member successes and challenges. Sixteen states transitioned to distance learning and 107 programs were implemented using delivery platforms and systems appropriate to their resources and needs. Co-facilitation, educator support, and partnerships were important to success, and expanded reach to new audiences and high retention were benefits.
Diabetes is one of the most common chronic diseases in the United States, affecting over 30 million Americans. An additional 84 million people have prediabetes, approximately 30% of whom will develop diabetes in the coming five years (Center for Disease Control and Prevention [CDC], 2020a). Prediabetes, a risk factor for type 2 diabetes, can be detected through simple screening tests (Engberg et al., 2009; American Diabetes Association, 2018). The high prevalence of prediabetes and small percentage of Americans who are aware that they have prediabetes (15%) creates an urgency to increase prediabetes screening and expand access to diabetes prevention programs for those at risk (CDC, 2020b).

To address the increasing burden of type 2 diabetes in the U.S., the Centers for Disease Control and Prevention (CDC) created the National Diabetes Prevention Program (National DPP) in 2010 to organize efforts to prevent or delay type 2 diabetes. A key component of the National DPP is an evidence-based lifestyle change program (LCP) that reduces the risk for developing type 2 diabetes by as much as 58% in people with prediabetes who lose 5 – 7% of body weight by (Knowler et al., 2002; Knowler et al., 2009). Those who achieve normal glucose regulation during this time have a 56% lower risk of developing diabetes in 10 years (Perreault et al., 2009). Despite efforts by the National DPP to expand programming, many areas do not have access to diabetes prevention education and many at-risk groups are underrepresented in these programs. The Cooperative Extension System (CES) has the potential to meet this need through its vast reach and mission to bring knowledge and skills to communities to improve health and well-being (Buys & Rennekamp, 2020; Cooperative Extension System, n.d.).

The CES National Framework for Health and Wellness published in 2014 aligns with the U.S. Department of Health and Human Services' National Prevention Strategy (National Prevention Council, 2011; National Framework for Health and Wellness, n.d.), and is based on the Social-Ecological model. Chronic disease prevention and management is one of the six priority program areas identified in the framework. Many State CES have joined the National DPP and adopted the CDC recognized LCP for diabetes prevention as one of their Extension chronic disease prevention programs. In most states, the LCP is delivered by Family and Consumer Sciences Extension educators trained as lifestyle coaches.

The CDC LCP, a twelve-month lifestyle intervention, can be delivered in-person, asynchronous online (no group meetings), synchronous distance learning, or a combination of in-person and distance learning (CDC, 2021). For in-person and distance learning programs participants meet for a minimum of sixteen sessions in the first six months, and once a month for the final six months. A trained lifestyle coach facilitates lessons on healthy eating, physical
activity, problem solving and stress management. Participants track their weight and physical activity for each session.

**PURPOSE**

The Cooperative Extension-National Diabetes Prevention Program working group (CE-NDPP), was formed in 2017 to expand diabetes prevention program delivery through Extension, and increase the number of state Cooperative Extension Services recognized by the CDC as diabetes lifestyle change program providers. Working group membership has expanded to 21 states (AK, AZ, AR, CO, FL, GA, ID, KS, KY, MI, MN, MO, NC, ND, NJ, NM, OK, SC, TN, VA, WA). When the CDC allowed in-person programs to transition to distance-learning in early 2020 due to COVID-19, the CE-NDPP focused their efforts on assisting member states transition their in-person programs to distance learning. This paper describes the CE-NDPP activities, actions taken and lessons learned by its member, and future opportunities created by these actions.

**BACKGROUND**

Diabetes emerged as a significant risk factor for severe COVID-19 infection (Petrilli, et al., 2020; Singh et al., 2020; Yang et al., 2020). People with COVID-19 and diabetes are more likely to be admitted to the ICU, require mechanical ventilation, and succumb to the disease (Seiglie et al., 2020). The social distancing restrictions implemented in early 2020 to control the spread of COVID-19 resulted in lower levels of physical activity, increased stress, and lower dietary quality (Gallagher et al., 2021; Tison et al., 2020; ). At the same time, many Extension educators were forced to halt critical in-person LCPs when prevention of diabetes was more important than ever.

To help communities combat the negative impact of COVID-19 on diabetes risk, Extension pivoted to provide the CDC LCP in distance learning formats. During COVID-19, the CE-NDPP supported member states by offering a national webinar on best practices for virtual delivery of the LCP and highlighting systems developed by three state Extension Services who had successfully transitioned to a distance learning format. Monthly meetings were conducted to support sharing of ideas and experiences throughout the year. In addition, the CE-NDPP investigated the response to COVID-19 and lessons learned among CE-NDPP member states. In early 2021, the CE-NDPP collected data from its members about their transition to distance learning, the platforms used, number of cohorts transitioned to or started through distance learning, CDC recognition status, and lessons learned. An online survey was emailed to the 21 CE-NDPP state Extension program members. In addition, in-depth information from three states about their strategies for delivering the LCP through distance learning was collected. The project was determined to be exempt from IRB Review by the University of Tennessee Institutional Review Board, as it did not involve human subjects as defined by federal regulations.

**FINDINGS**

**SURVEY RESULTS**

Twenty CE-NDPP members responded to the online survey and provided information about their respective state Extension programs. In response to COVID-19, 16 states pivoted from in-person to distance learning or online programs and educated 107 cohorts of LCP participants. These programs used a variety of formats including video conferencing and audio only teleconferencing. Eight Extension organizations applied for CDC recognition in the distance learning modality during the pandemic. Key lessons learned, benefits and challenges are presented in Table 1.

**HIGHLIGHTS OF THREE EXTENSION DISTANCE LEARNING PLATFORMS FOR THE CDC LIFESTYLE CHANGE PROGRAM**

The CE-NDPP featured details of three State Extension System approaches to distance learning systems for delivering the LCP in a national webinar on November 6, 2020. (Table 2)

**Virginia Cooperative Extension (VCE):**

**APPROACH**

A core team of VCE Extension faculty mobilized in early 2020 to create the online platform and provide the training necessary for Extension agents to offer the LCP through distance learning. VCE utilized CanvasTM, a web-based learning management system available at Virginia Tech, to create an all-in-one online participant program platform that contains all required participant and Extension Lifestyle Coach materials and facilitates collection of CDC required outcome metrics. Design criteria for the platform were that it house standardized materials to facilitate all 26 sessions of the program, facilitate between-session communication, have a
simple participant interface for easy access to live sessions, data collection systems, and participant resource materials, and comply with HIPAA standards.

VCE adjusted their process for evaluating eligibility of interested individuals to accommodate the online environment. Rather than a group information session, interested individuals are contacted for an individual phone conversation at which time eligibility is determined, program fit assessed, and required information collected for eligible individuals who choose to register for the program. Registered participants are mailed a set of program materials prior to the start of the program that include the participant handbook and tracking logs, activity monitor, stretch band, and calorie book.

PROGRAM FEATURES AND DATA COLLECTION
The final Canvas program platform met all design criteria. The Lifestyle Coach customizes a home page with their personal information and an introduction video. Modules for each of the 26 sessions contain all required instructional materials. The Lifestyle Coach is able to customize each module and control participant access as the session date approaches. VCE staff developed a schedule of between session texts with supportive links to CDC reinforcement videos that the Lifestyle Coach distributes to participants through the Canvas platform. Participants enter the Canvas platform on a landing page for the session scheduled for that week. A Zoom link to the live sessions is found on the landing page for ease of access, as well as a link to the HIPAA compliant data entry system (Google Forms) where participants report their weekly weights and physical activity minutes. Electronic copies of the relevant pages from the participant handbook and additional support materials and links are also found on this page. Finally, short training videos on Canvas, Zoom, and a food tracking app (LoseIt!) are linked on every session landing page to orient participants to the technology.

University of Minnesota Extension (UME) APPROACH
UME conducted an ongoing series of LCP telehealth cohorts in early 2020 to pilot its effectiveness and to establish best practices for a distance delivery model. The team chose Zoom for session delivery, as it is easily accessible from a variety of devices and includes built-in tools for engagement. Each cohort was led by a team of two lifestyle coaches: the primary coach provided course content and facilitated group discussion, and the second coach monitored the chat and handled any technological issues that might arise. Outside of the distance learning classroom, each pair of lifestyle coaches worked with a multidisciplinary planning team, including distance learning support and an evaluation specialist, that provided training and support on Zoom, record-keeping, data gathering methods, post-session debriefs, and other strategies to foster participant engagement in a distance learning setting. In addition, each pair of coaches also worked with organizational Master Trainer Selects on an ongoing basis to discuss and plan visuals, engagement tools, and adapt content for a distance learning environment.

PROGRAM FEATURES AND DATA COLLECTION
Participant experience was prioritized throughout all phases of planning and program implementation. A participant readiness assessment was developed and established as a key element of program delivery. This tool was initially designed as a way for coaches to connect with participants to determine their comfort level with technology and if they had a reliable, affordable way to connect to the internet. It immediately became clear that the readiness assessment became a mechanism to build trust and rapport between coach and participant as it provided a space for coaches to work alongside participants to best prepare them for successful participation and completion of the program. Qualtrics was initially selected to collect session data because it was institutionally available to the lifestyle coaches and allowed for secure data collection and analysis. Participants were provided with a de-identified code to use when entering their data. However, over time it became evident that this data collection system was neither easy nor comfortable for many of the participants. To make data collection easier, coaches allowed participants to choose a method that worked for them, either providing the information over the phone, through a password protected Excel spreadsheet, or an online application such as MyFitnessPal or LoseIt!. Although this approach required more time of the lifestyle coach, participants felt less burdened and submitted data more consistently.
approach
A team of two Extension faculty developed an online delivery system for the UI LCP in January, 2020 and applied for CDC recognition status to provide a distance learning modality. The first UI LCP distance learning program began in February 2020. With the onset of COVID-19 in March 2020, all faculty and professional staff were trained to deliver the program via distance learning, and all in-person programs were moved to distance learning. To develop the distance learning platform for the UI LCP, lead faculty utilized programs and tools readily available through their university.

program features and data collection
Participants interested in the UI LCP register using the UI Marketplace, an online site where UI Extension customers sign up and register for classes. Once a participant registers, they are sent an email with a welcome letter and link to a Qualtrics survey to complete a program consent form and questionnaire. Upon completion, a participant is assigned a de-identified code and receives a second email with details to attend their first program session. UI Extension faculty and staff lifestyle coaches deliver the UI LCP live using the UI Zoom video-conferencing system. Using the Zoom program tools, the coaches share their screen to display session handouts, supplemental information such as weight logs, and lead group discussion. Participants can also unmute or use chat to participate in discussions. In the first distance learning session, participants are informed how to access a Qualtrics link and use their de-identified code to log their weight and physical activity.

The UI lead faculty are currently considering other distance learning delivery programs and methods to further enhance and develop the UI National DPP. The current delivery method, using four programs for registration, program delivery, and data collection is working, but has several limitations. The current delivery system is not an all-in-one platform that coaches and participants can access for everything, such as materials, communication, and recordings. Participant tracking of enrollment, forms, and logs involves integrating data from three programs. One platform that collected all data and forms could streamline this process, reduce data collection workload and errors. UI lead faculty plan to pilot an integrated platform designed for the diabetes prevention program in 2021 to determine if it may be an option for DPP distance learning.

discussion
The COVID-19 pandemic presented challenges to chronic disease prevention efforts. As Extension offices suspended in-person programming across the country, many program coordinators made the decision to pivot to remote delivery. In the case of Extension organizations offering the CDC LCP, the peer support and resources offered by the CE-NDPP helped ease the transition to this unfamiliar delivery mode. The CE-NDPP provided a way for program coordinators to get support for challenges and share best practices.

Cooperative Extension is embedded in all land-grant universities in the United States. As part of the university system, organizations had immediate access to a variety of distance learning delivery platforms, data collection management systems, and support from university digital learning offices. This connection with the university system allowed Extension to respond with the necessary tools and support to seamlessly transition to distance delivery. The three programs featured in
this article developed distance learning platforms and systems based on their local needs and resources.

All three programs found that Zoom provided sufficient functionality and opportunity for engagement to provide a quality experience for participants during sessions. Each developed different systems for collecting weekly weights and physical activity minutes from participants as required by the CDC. VCE opted for an integrated platform that centralized operations and combined systems into a “one stop shop”. They standardized materials used in program delivery while still allowing for some customization by the educators. UME took a team approach to conducting the program, providing educators with support through a multi-disciplinary team. Their system was participant centered with educators adapting their instruction and data collection methods to meet the participants needs and preferences. UI used four separate systems for participant registration, program delivery, communication and data collection that they found cost effective, but are looking for a more integrated system for future programs that they believe will be more efficient.

Increased flexibility in modes of delivery of the LCP will enhance Extension's ability to equitably serve our target audience. Given the growing use and acceptance of accessible technologies in low-income communities, synchronous remote LCP delivery can benefit many low-income individuals at risk of diabetes (Kim et al., 2019; Reininger et al., 2013). Online distance learning programs address the concerns of lack of transportation and long distances to in-person classes (Mensa-Wilmot, et al. 2017). Although internet access is an issue for some communities, the vast majority of the US population has access to various types of mobile technology (Seervai & Gustafson, 2018). All of the CE-NDPP member states that applied for CDC recognition as a distance learning LCP provider plan to continue their in-person programs to accommodate the resources and preferences of people who wish to participate in the LCP.

The challenge for state Extension Services is to develop program delivery systems that enhance the conduct of the LCP and its key strategies of goal setting, self-monitoring, and motivational peer support within an appealing and user-friendly interface critical for successful weight loss (McTigue & Conroy, 2013). The CE-NDPP provides program coordinators a platform to discuss these needs, share best practices, and coordinate national evaluation efforts. The lessons learned during the COVID-19 pandemic by CE-NDPP members presented in this paper will inform the conduct of future distance learning and in-person LCP programs. The CE-NDPP will continue to meet monthly and plan support activities to improve diabetes prevention efforts in Extension far beyond the COVID-19 pandemic era.
References
Preventing Financial Exploitation of Older Adults in South Dakota by Family Members: A Qualitative Pilot Study Exploring the Role of Financial Powers of Attorney
References


[https://www.cdc.gov/violenceprevention/elderabuse/definitions.html](https://www.cdc.gov/violenceprevention/elderabuse/definitions.html)


[https://lawyers.law.cornell.edu/lawyers/elder-law/south-dakota](https://lawyers.law.cornell.edu/lawyers/elder-law/south-dakota)


https://www.plannersearch.org/financial-planner/south-dakota


http://doi.org/10.1891/1052-3073.30.1.6

Iowa State University. (n. d.). *Strengthening Families Program: For parents and youth 10-14.*

https://www.extension.iastate.edu/sfp10-14/


https://doi.org/10.1080/08959420.2019.1704143

Smith, A. S., & Trevelyan, E. (2019, October 22). *In some states, more than half of older residents live in rural areas.* Retrieved from https://www.census.gov/library/stories/2019/10/older-population-in-rural-america.html#:~:text=More%20than%201%20in%205,to%2013.8%25%20in%20urban%20areas


Table 1

**Participant Information**

<table>
<thead>
<tr>
<th>Participant</th>
<th>Role</th>
<th>Relationship to Older Adult</th>
<th>Number of Children of Older Adult</th>
<th>Older Adult Living in Rural Area</th>
</tr>
</thead>
<tbody>
<tr>
<td>Izzy</td>
<td>POA agent</td>
<td>Daughter</td>
<td>2</td>
<td>Yes</td>
</tr>
<tr>
<td>Chester</td>
<td>Older adult</td>
<td>Self</td>
<td>4</td>
<td>Yes</td>
</tr>
<tr>
<td>Lilly</td>
<td>POA agent</td>
<td>Daughter</td>
<td>2</td>
<td>Yes</td>
</tr>
<tr>
<td>Darwin</td>
<td>Older adult</td>
<td>Self</td>
<td>2</td>
<td>Yes</td>
</tr>
<tr>
<td>Charlie</td>
<td>Older adult</td>
<td>Self</td>
<td>3</td>
<td>Yes</td>
</tr>
<tr>
<td>Scarlett</td>
<td>POA agent</td>
<td>Niece</td>
<td>2</td>
<td>No</td>
</tr>
</tbody>
</table>
Raising Caring Kids: Using Email to Engage Families in Social Emotional Learning
References


University of Wisconsin Division of Extension’s Institute of Human Development and Relationships and the Wisconsin Department of Public Instruction partnered to create RCK. This project was made possible by funding from U.S. Department of Education grant 84.184F, School Climate Transformation Project award number S184F140040 – 17.
### Table 1. Number of ideas learned by core SEL competency

<table>
<thead>
<tr>
<th>Core competency</th>
<th># of mentions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Social skills</td>
<td>21</td>
</tr>
<tr>
<td>Personal emotions</td>
<td>18</td>
</tr>
<tr>
<td>Empathy</td>
<td>13</td>
</tr>
<tr>
<td>Respect others</td>
<td>13</td>
</tr>
<tr>
<td>Positive self-identity</td>
<td>8</td>
</tr>
<tr>
<td>Responsible choices</td>
<td>8</td>
</tr>
<tr>
<td>Lifelong learner</td>
<td>7</td>
</tr>
<tr>
<td>Civic responsibility</td>
<td>2</td>
</tr>
</tbody>
</table>
Mindfulness is when you are aware of your feelings from moment-to-moment, and don’t judge them as good or bad.

What we know:

- Children feel stress, just like adults. They can be stressed about things like needing a ride, getting bullied at school, or being scared of the dark.
- Simple skills can help children handle stress. This short Raising Caring Kids “Mindfulness” video explains how deep breathing, journaling, and yoga all help children feel calm and better able to handle stress.

Try this:

Practice breathing or mindfulness to help you and your child better deal with difficult emotions. [Mindful Schools shared research](https://mindful.org) showing that mindfulness creates changes in the brain that help us deal with emotions and stress. Mindfulness also helps children be more positive and liked by their peers.

For fun:

Create a [mindful jar](https://mindful.org) (as described by Mindful.org) with your child by filling a jar or empty water bottle with glitter and water. When your child gets upset, shake the jar and practice mindful breathing with them until the glitter settles to the bottom of the jar. Tell your child that strong feelings are just like the glitter when it is shaken up. There is glitter everywhere. When we are still and let a little time pass, our feelings settle like the glitter and our minds become clear again.
Figure 2: Confidence Level in Teaching SE Skills to Children (n=64)
### Nutrition Extension Educators’ Perceptions of Evidence-based Practice

<table>
<thead>
<tr>
<th>Nutrition</th>
<th>Typical Values</th>
<th>per 100 g</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Energy value</strong></td>
<td><strong>(Calories)</strong></td>
<td>920 kJ</td>
</tr>
<tr>
<td><strong>Protein</strong></td>
<td><strong>220 kcal</strong></td>
<td>22 g</td>
</tr>
<tr>
<td><strong>Carbohydrate</strong></td>
<td><strong>10.7 g</strong></td>
<td>25.1 g</td>
</tr>
<tr>
<td><strong>(of which Sugars)</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Fat</strong></td>
<td><strong>2.2 g</strong></td>
<td>8.3 g</td>
</tr>
<tr>
<td><strong>(of which Saturates)</strong></td>
<td></td>
<td>1.0 g</td>
</tr>
<tr>
<td><strong>Fibre</strong></td>
<td><strong>4.1 g</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Sodium</strong></td>
<td><strong>2.6 g</strong></td>
<td>0.2 g</td>
</tr>
<tr>
<td><strong>Salt</strong></td>
<td><strong>0.6 g</strong></td>
<td>0.4 g</td>
</tr>
<tr>
<td><strong>GDA = Guideline Daily Amount</strong></td>
<td></td>
<td>1.0 g</td>
</tr>
</tbody>
</table>
References


[https://www.internationaldietetics.org/Downloads/ICDA-Definition-of-Evidence-Based-Practice.aspx](https://www.internationaldietetics.org/Downloads/ICDA-Definition-of-Evidence-Based-Practice.aspx)


[https://www.sneb.org/nutrition-educator-competencies/](https://www.sneb.org/nutrition-educator-competencies/)


<table>
<thead>
<tr>
<th>Activities: Considering your nutrition extension education efforts over the past year, how often have you done the following in response to a gap in your knowledge (1 = never and 7 = frequently)</th>
<th>mean ± SD</th>
</tr>
</thead>
<tbody>
<tr>
<td>“Formulated a clearly answerable question as the beginning of the process towards filling this gap”</td>
<td>5.4 ± 1.1</td>
</tr>
<tr>
<td>“Tracked down the relevant evidence related to your question” (gap in knowledge)”</td>
<td>6.0 ± 0.9</td>
</tr>
<tr>
<td>“Critically appraised, against set criteria, any literature you have discovered”</td>
<td>4.6 ± 1.7</td>
</tr>
<tr>
<td>“Integrated the evidence you have found with your nutrition extension efforts]”</td>
<td>5.7 ± 1.3</td>
</tr>
<tr>
<td>“Evaluated the outcomes of your nutrition extension education efforts]”</td>
<td>5.5 ± 1.6</td>
</tr>
<tr>
<td>“Shared this information with colleagues”</td>
<td>4.2 ± 1.7</td>
</tr>
</tbody>
</table>

**Attitudes (scale 1–7)**

1 = “My workload is too great to keep up to date with all the new [nutrition] evidence” to 7 = [New nutrition research is so important I make time in my schedule]”

1 = “I resent having my [nutrition extension education efforts] questioned to 7 = I welcome questions on my [nutrition extension education]”

1 = “Evidence-based [nutrition education] is a waste of time to 7 = Evidence-based [nutrition education] is fundamental to extension efforts”

1 = “I stick to tried and trusted methods rather than changing to anything new” 5.7 ±1.5

7 = “My [nutrition extension education efforts] have changed due to evidence I have found”
<table>
<thead>
<tr>
<th>Knowledge, Skills, and Abilities (1 = Poor and 5 = Excellent)</th>
</tr>
</thead>
<tbody>
<tr>
<td>“Research skills”</td>
</tr>
<tr>
<td>“IT skills”</td>
</tr>
<tr>
<td>“Monitoring and reviewing of [nutrition extension education skills]”</td>
</tr>
<tr>
<td>“Converting your information needs into a research question”</td>
</tr>
<tr>
<td>“Awareness of major information types and sources”</td>
</tr>
<tr>
<td>“Ability to identify gaps in your [nutrition knowledge]”</td>
</tr>
<tr>
<td>“Knowledge of how to retrieve evidence”</td>
</tr>
<tr>
<td>“Ability to analyse critically evidence against set standards”</td>
</tr>
<tr>
<td>“Ability to determine how valid (close to the truth) the material is”</td>
</tr>
<tr>
<td>“Ability to determine how useful (applicable to nutrition extension efforts) the material is”</td>
</tr>
<tr>
<td>“Ability to apply information to [nutrition extension education efforts]”</td>
</tr>
<tr>
<td>“Sharing of ideas and information with colleagues”</td>
</tr>
<tr>
<td>“Dissemination of new ideas [about nutrition extension education] to colleagues”</td>
</tr>
<tr>
<td>“Ability to review your own [nutrition extension education efforts]”</td>
</tr>
</tbody>
</table>
Focus Groups Inform Disaster Preparedness Resources and Strategies
References


https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5069973/


https://www.fema.gov/about/openfema/data-sets/national-household-survey


your-financial-emergency-kit


https://onlinelibrary.wiley.com/doi/pdf/10.1037/h0080187?casa_token=22eyIbjy1ugAAAAA:dZGLV_0dFe8j79LuWe4GZRGl8xi9PDI_5fH1tz5SdpGavTMlbcsnTTEb0euKpmy0V7vQowQ52TG_Q


https://www.academia.edu/download/49067950/Facing_the_Unexpected_Disaster_Preparedn20160923-26439-yqo3w1.pdf

Stewart, K., & Williams, M. (2012). Researching online populations: the use of online focus groups for social research. *Qualitative Research, 5*(4), 395-416.


Appendix A

Questions asked during the focus group included:

1. What financial issues were survivors better able to deal with and why? What financial issues were more challenging for survivors to deal with and why?

2. What financial knowledge, attitudes, skills, and behaviors support financial resilience [in disaster recovery]?

3. Where do people go to get information/assistance on getting their finances in order?

4. What resources are currently available to help survivors financially prepare for a disaster? How effective are current resources (which are meeting the need, missing the mark, or are missing altogether)?

5. What would good resources look like? What delivery formats would allow survivors to be more financially resilient following a disaster?

6. What do we need to make these resources accessible and utilized?

7. Are there issues of diversity that impact how individuals and/or families prepare their finances to be more resilient following a disaster?

8. What else would you have wished we discussed today? Are there items that you feel we missed in this conversation? What are other disaster preparedness or recovery needs that you think Extension should be looking at?

9. Of all the things we’ve talked about today regarding financial preparedness resources what is most important?
# Disaster Financial Preparedness

**Start planning today!**

## Create and use a spending plan
- **Income**
  - Expenses
    - Fixed
    - Flexible
    - Non-monthly/periodic
- Balance bottom line

## Develop an emergency fund
- Keep 3-6 months of income liquid for unexpected uses.

## Have cash on hand
- Banks may be closed
- Power outages means no credit cards or ATM's
- Allows continued purchasing

## Determine debt to income ratio
- 15% or less is ideal!
- Monthly debt payments + monthly net income = debt to income ratio.

## Review credit report
- [www.annualcreditreport.com](http://www.annualcreditreport.com)

## Develop household inventory
- Serves as proof of possessions and helps determine insurance needs.

## Review insurance
- Determine coverage
- Assess needs
- Understand how it works
- Identify needed changes

## Organize important papers
- [umn.edu/grab-n-go](http://umn.edu/grab-n-go)

## Seek assistance
- [umn.edu/disaster-prep](http://umn.edu/disaster-prep)

## Questions?
- **Contact:**
  - Sara Croymans, Extension educator
  - croym001@umn.edu
An Assessment of Programmatic Gaps in Extension Financial Management Education in Utah
References


<table>
<thead>
<tr>
<th>Topic</th>
<th>NI</th>
<th>LI</th>
<th>MI</th>
<th>I</th>
<th>VI</th>
</tr>
</thead>
<tbody>
<tr>
<td>Personal financial management</td>
<td>2</td>
<td>0</td>
<td>2</td>
<td>37</td>
<td>59</td>
</tr>
<tr>
<td>Household financial planning</td>
<td>2</td>
<td>2</td>
<td>10</td>
<td>32</td>
<td>54</td>
</tr>
<tr>
<td>Managing expenses</td>
<td>2</td>
<td>0</td>
<td>7</td>
<td>42</td>
<td>49</td>
</tr>
<tr>
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<td>2</td>
<td>0</td>
<td>5</td>
<td>49</td>
<td>44</td>
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<td>Building savings</td>
<td>2</td>
<td>2</td>
<td>15</td>
<td>44</td>
<td>37</td>
</tr>
<tr>
<td>Preparing for homeownership</td>
<td>5</td>
<td>10</td>
<td>15</td>
<td>37</td>
<td>33</td>
</tr>
<tr>
<td>Fraud and identity theft protection</td>
<td>2</td>
<td>5</td>
<td>27</td>
<td>34</td>
<td>32</td>
</tr>
<tr>
<td>Maintaining homeownership</td>
<td>7</td>
<td>8</td>
<td>23</td>
<td>33</td>
<td>30</td>
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<tr>
<td>Understanding credit</td>
<td>2</td>
<td>0</td>
<td>25</td>
<td>44</td>
<td>29</td>
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<td>2</td>
<td>25</td>
<td>45</td>
<td>23</td>
</tr>
<tr>
<td>Insurance education</td>
<td>2</td>
<td>5</td>
<td>44</td>
<td>27</td>
<td>22</td>
</tr>
</tbody>
</table>

*Note. NI = Not important, LI = Of little importance, MI = Moderately important, I = Important, VI = Very important.*
Table 2

Faculty's Current Delivery of Finance Education to Clientele

<table>
<thead>
<tr>
<th>Topic</th>
<th>% (n = 43)</th>
<th>Never</th>
<th>1/year</th>
<th>2-5/year</th>
<th>6-10/year</th>
<th>&gt;10/year</th>
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</thead>
<tbody>
<tr>
<td>Personal financial management</td>
<td>53</td>
<td>27</td>
<td>15</td>
<td>3</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>Managing expenses</td>
<td>55</td>
<td>20</td>
<td>18</td>
<td>0</td>
<td>7</td>
<td></td>
</tr>
<tr>
<td>Building savings</td>
<td>60</td>
<td>20</td>
<td>15</td>
<td>3</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>Household financial planning</td>
<td>63</td>
<td>15</td>
<td>15</td>
<td>0</td>
<td>7</td>
<td></td>
</tr>
<tr>
<td>Debt repayment</td>
<td>65</td>
<td>15</td>
<td>13</td>
<td>2</td>
<td>5</td>
<td></td>
</tr>
<tr>
<td>Understanding credit</td>
<td>65</td>
<td>18</td>
<td>10</td>
<td>5</td>
<td>2</td>
<td></td>
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<tr>
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<td>7</td>
<td>3</td>
<td>2</td>
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<td>0</td>
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<tr>
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<td>8</td>
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<td>3</td>
<td>2</td>
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<td>0</td>
<td>3</td>
<td>2</td>
<td></td>
</tr>
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<td>93</td>
<td>5</td>
<td>0</td>
<td>2</td>
<td>0</td>
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</tr>
</tbody>
</table>
### Table 3

**Faculty’s Perceived Ability to Provide Finance Education to Clientele**

<table>
<thead>
<tr>
<th>Topic</th>
<th>% (n = 43)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>N</td>
</tr>
<tr>
<td>Managing expenses</td>
<td>2</td>
</tr>
<tr>
<td>Personal financial management</td>
<td>2</td>
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<tr>
<td>Debt repayment</td>
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<td>Building savings</td>
<td>5</td>
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<tr>
<td>Understanding credit</td>
<td>7</td>
</tr>
<tr>
<td>Household financial planning</td>
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<tr>
<td>Maintaining homeownership</td>
<td>10</td>
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<td>Preparing for homeownership</td>
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<td>Fraud and identity theft protection</td>
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<tr>
<td>Retirement investments</td>
<td>12</td>
</tr>
<tr>
<td>Insurance education</td>
<td>12</td>
</tr>
</tbody>
</table>

*Note. N = None, BA = Below average, A = Average, AA = Above average, E = Excellent*
### Table 4

*Ranked Finance Programming Needs*

<table>
<thead>
<tr>
<th>Topic</th>
<th>$z$-statistic</th>
<th>$p$-value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Personal financial management</td>
<td>-5.36</td>
<td>&lt;0.001</td>
</tr>
<tr>
<td>Building savings</td>
<td>-5.35</td>
<td>&lt;0.001</td>
</tr>
<tr>
<td>Debt repayment</td>
<td>-5.30</td>
<td>&lt;0.001</td>
</tr>
<tr>
<td>Insurance education</td>
<td>-5.30</td>
<td>&lt;0.001</td>
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<tr>
<td>Understanding credit</td>
<td>-5.27</td>
<td>&lt;0.001</td>
</tr>
<tr>
<td>Household financial planning</td>
<td>-5.23</td>
<td>&lt;0.001</td>
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<tr>
<td>Fraud and identity theft protection</td>
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<td>&lt;0.001</td>
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<tr>
<td>Managing expenses</td>
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<td>&lt;0.001</td>
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<tr>
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<td>-5.15</td>
<td>&lt;0.001</td>
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<td>Retirement investments</td>
<td>-5.15</td>
<td>&lt;0.001</td>
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<tr>
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### Table 5

**Ranked Professional Development Needs**

<table>
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<th>p-value</th>
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</thead>
<tbody>
<tr>
<td>Personal financial management</td>
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<td>&lt;0.001</td>
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<tr>
<td>Household financial planning</td>
<td>-4.29</td>
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<tr>
<td>Retirement investments</td>
<td>-4.22</td>
<td>&lt;0.001</td>
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<td>-4.02</td>
<td>&lt;0.001</td>
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<td>Insurance education</td>
<td>-3.96</td>
<td>&lt;0.001</td>
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<td>Fraud and identity theft protection</td>
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<td>-3.61</td>
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</tr>
<tr>
<td>Managing expenses</td>
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<td>&lt;0.001</td>
</tr>
<tr>
<td>Maintaining homeownership</td>
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<td>&lt;0.01</td>
</tr>
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<td>Building savings</td>
<td>-2.79</td>
<td>&lt;0.01</td>
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<tr>
<td>Understanding credit</td>
<td>-2.74</td>
<td>&lt;0.01</td>
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online class

Needs Assessment Results for Online Adult SNAP-Ed Courses
References


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<tr>
<td>Female</td>
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<td>439</td>
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<td>60+ years</td>
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<td>Previously participated in a SNAP-Ed class</td>
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<td>Key Example Quotes</td>
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<tr>
<td>Knowledge</td>
<td>Knowledge gap</td>
<td>“Knowledge. [There are] so many different ideas on what is healthy right now. I’m confused at how to eat healthy.”</td>
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<tr>
<td></td>
<td>Time</td>
<td>“That I am not fooled by “healthy” products that are not healthy.”</td>
</tr>
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<td></td>
<td>Portion sizes</td>
<td>“The types of foods that are considered healthy and how to integrate them into my daily routine.”</td>
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<td>Specific food/nutrient concern</td>
<td>Variety</td>
<td>“Healthy seems to take too long.”</td>
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<td></td>
<td></td>
<td>“Time. Cooking healthy almost always takes more time.”</td>
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<tr>
<td></td>
<td></td>
<td>“Getting enough vegetables and less sugar.”</td>
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<td></td>
<td></td>
<td>“Variety and not eating the same healthy food over and over.”</td>
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<tr>
<td></td>
<td></td>
<td>“Getting enough nutrients for the day. Balancing calories with 3 meals plus snacks everyday as well as watching the ingredients.”</td>
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<td>Preferences</td>
<td>Child/family preferences</td>
<td>“I won’t be able to get my kids to eat stuff that’s good for them.”</td>
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<td></td>
<td></td>
<td>“Finding ways to incorporate healthy foods into picky kids’ diets.”</td>
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<td></td>
<td>Other food preferences</td>
<td>“I love sugar and fatty desserts and it’s hard to give that up.”</td>
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<td></td>
<td>Satiation</td>
<td>“Will it taste as good as unhealthy things?”</td>
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<td></td>
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<td>“That it will keep me full, lately I feel like when I eat healthy I can eat a ton of food.”</td>
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<td>Prohibitive factors</td>
<td>Access</td>
<td>“Being able to find high quality produce.”</td>
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<td>Cost</td>
<td>“The cost of eating healthy is expensive.”</td>
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<td></td>
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<td>“Being able to afford the food I need to be healthy.”</td>
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<td></td>
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<td>“Reducing sodium and sugar on a budget.”</td>
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<td>Pesticides/chemicals</td>
<td>“Processed food/chemical additives.”</td>
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<td>Shelf-life</td>
<td>“Constant shopping (fresh foods go bad fast).”</td>
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<td></td>
<td>Special dietary needs</td>
<td>“My daughter has multiple severe food allergies, so balancing healthy, allergies, and prep time is my biggest challenge.”</td>
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<tr>
<td>Themes</td>
<td>Subthemes</td>
<td>Key Example Quotes</td>
</tr>
<tr>
<td>------------------------</td>
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<tr>
<td>External individual factors</td>
<td>Childcare</td>
<td>“Being able to do so while taking care of children/finding time alone or figuring out to be active with children.”</td>
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<td></td>
<td>Knowledge</td>
<td>“How much activity do I need to be healthy?”</td>
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<td>Family responsibilities</td>
<td>Enjoyment</td>
<td>“Finding activities that the whole family likes.”</td>
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<td></td>
<td>Motivation</td>
<td>“Finding something I like doing.”</td>
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<td></td>
<td></td>
<td>“Just finding the motivation to start and keep going.”</td>
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<td></td>
<td>Equipment</td>
<td>“Clothes, shoes to exercise in.”</td>
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<td>Internal individual factors</td>
<td>Physical limitations</td>
<td>“What activities I can do with limited mobility.”</td>
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<td></td>
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<td>“Long term/permanent injuries preventing physical activity.”</td>
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<td></td>
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<td>“Chronic pain.”</td>
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<td></td>
<td>Safety concerns</td>
<td>“Injuring myself due to not fully knowing the exercise or because of trying too much too soon.”</td>
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<tr>
<td></td>
<td></td>
<td>“Wearing out my joints.”</td>
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<td></td>
<td></td>
<td>“It takes effort and energy I don’t feel I have.”</td>
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<td></td>
<td>Lack of energy</td>
<td>“My energy levels are always so low that I don’t have enough to exercise.”</td>
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<td>Diet/food concerns</td>
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<td>“Am I eating right food to help with growth?”</td>
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<td>Motivators</td>
<td>Staying healthy</td>
<td>“Being able to manage our weight, feel better with more energy, a better mood, feel more realized and sleep better.”</td>
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<td></td>
<td></td>
<td>“Having energy to live long and keep up with my kids.”</td>
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<tr>
<td></td>
<td>Losing weight</td>
<td>“Staying on this planet as long as I can for my daughter. I’m all she has.”</td>
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<td></td>
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<td>“Slimming down.”</td>
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<td></td>
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<td>“Weight loss.”</td>
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<td>Community level barriers</td>
<td>Cost</td>
<td>“There is no community for it without extreme costs.”</td>
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<td></td>
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<td>“Affordable exercise options in the winter.”</td>
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<td></td>
<td>Access</td>
<td>“Accessibility.”</td>
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<td></td>
<td>Environment</td>
<td>“Air quality in the winter. I can’t walk outdoors in the inversion season.”</td>
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<tr>
<td></td>
<td></td>
<td>“To stay active in the heat of the summer.”</td>
</tr>
</tbody>
</table>
Lived Experiences of Extension Professionals Parenting in a Pandemic
References


https://search.credoreference.com/content/entry/wileyfamily/abc_x_model_of_family_stress_and_coping/0


https://doi.org/10.1177/1476718X20977583


Appendix

Extension Professional Parenting in a Pandemic Codebook

1) Context, External Factors, Pandemic Factors
   A. Childcare challenges – loss or challenges related to daycare or childcare
   B. Virtual School – school at home, online school, managing children’s school work
   C. Isolation – social distance, distance from loved ones, missing out
   D. Pandemic concerns – safety, health, practicing precautions, fear or infection

2) Changes in Family Life
   A. Screen time – mention of children’s electronic use
   B. Leniency – parents allowing things they normally wouldn’t, changing rules, easier going
   C. Changes to structure – related to scheduling, routines, or changes to normal
   D. Stuck at home – quarantine, all at home, trapped
   E. More family time – related to increase amount of family time or quality of time

3) Perceived Parenting Burden
   A. Role Overload or Role Tension – managing work, parenting, and child’s school
   B. Changes in Work-Life – related to overlap of personal and professional life, work from home, more work time, less family time
   C. Concern for child – expressing specific concern for their child’s wellbeing (academic, emotional, etc.) – not related to isolation
   D. Meeting needs – supporting child, teaching coping skills, listening, “demanding”
   E. Unpredictable – not knowing what’s coming, chaotic, constant change
   F. Communication – answering child’s questions, explaining situation, communicating new expectations
   G. No “Me Time” - no breaks, always with people, no alone time

4) Emotional Toll
   A. Inadequate – related to parents feeling inadequate, bad parent, children suffering, not doing enough
   B. Less patience – related to parents’ short temper, short fuse, more frustration
   C. Stress – related to parents’ own emotions like anxiety, high pressure, mental health, overwhelm, unpredictable emotions
   D. Tired – parent expressing exhaustion, fatigue, worn out
   E. Distracted – hard to focus, split attention, multitasking, less present

5) Spectrum of Experience
   A. Pandemic Positives – a focus or perspective with a positive spin
   B. No change – expressions of little to no change in parenting or about the same
   C. Pandemic Baby – having a child during the pandemic
   D. Family Caregiving – related to non-child family caregiving (e.g. elderly parent, neighbor)
   E. Closer with kids – mention of stronger parent/child relationships, being more in-tune
   F. Interacting with Adult child – mention of adult child, includes grandparenting or grandchildren
Beating the Pandemic Blues
References


National 4-H Council (2020, June 17). New survey finds 7 in 10 teens are struggling with mental health. https://4-h.org/media/new-survey-finds-7-in-10-teens-are-struggling-with-mental-health/


Appendix

Table 1

Evaluation results from the “Stay Calm and Well” series

<table>
<thead>
<tr>
<th>Session Title</th>
<th># of attendees</th>
<th># of evaluations received</th>
<th>% who can use the information presented to cope with current circumstances</th>
<th>% who plan to use the information presented on a regular basis</th>
<th>% who believe the information will help them</th>
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<tr>
<td>Overview Session</td>
<td>1,257</td>
<td>1,165</td>
<td>93</td>
<td>90</td>
<td>91</td>
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<td>Beat the Blues with Exercise</td>
<td>1,074</td>
<td>1,061</td>
<td>95</td>
<td>91</td>
<td>93</td>
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<td>Beat the Blues by Unplugging</td>
<td>1,173</td>
<td>962</td>
<td>93</td>
<td>92</td>
<td>93</td>
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<td>Beat the Blues with Humor</td>
<td>932</td>
<td>923</td>
<td>88</td>
<td>85</td>
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<td>Beat the Blues through Connection</td>
<td>804</td>
<td>758</td>
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Table 2

*Evaluation results from the “Beating the Winter Blues” series*

<table>
<thead>
<tr>
<th>Session Title</th>
<th># of attendees</th>
<th># of evaluations received</th>
<th>% who learned new information</th>
<th>% who plan to use the information</th>
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<td>86</td>
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<td>Beat the Blues with Exercise</td>
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<td>15</td>
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<td>Beat the Blues by Unplugging</td>
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<td>16</td>
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<td>Beat the Blues with Humor</td>
<td>58</td>
<td>19</td>
<td>100</td>
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</table>
H2O to Go – Staying Hydrated Safely: A Reusable Water Bottle Safety Education and Research Project
References

Ballweg, M., C. Thompson, and L. Suppes. (2019). Is your water bottle dirtier than your toilet seat?

https://minds.wisconsin.edu/bitstream/handle/1793/77473/BallwegSpr17.pdf?

sequence=2&isAllowed=y


https://www.grandviewresearch.com/industry-analysis/resuable-water-bottle-market


https://www.pewresearch.org/fact-tank/2013/06/21/the-challenges-of-conducting-surveys-on-youths/


Table 1.

*Differences in Mean Scores for Student Water Bottle Skills and Behaviors*

<table>
<thead>
<tr>
<th>Skill/Behavior</th>
<th>Intervention Group</th>
<th>Post Survey</th>
<th>P</th>
<th>Control Group</th>
<th>Intervention Group</th>
<th>P</th>
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<tr>
<td>I can teach someone how to correctly clean a reusable water bottle</td>
<td>2.83</td>
<td>4.08</td>
<td>0.00003</td>
<td>3.76</td>
<td>4.2</td>
<td>0.08076</td>
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<td>I can explain to someone how to avoid spreading germs while using a reusable water bottle</td>
<td>3.13</td>
<td>4.30</td>
<td>0.00089</td>
<td>3.95</td>
<td>4.44</td>
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<tr>
<td>I can demonstrate the practice of correctly cleaning a reusable water bottle</td>
<td>2.83</td>
<td>4.17</td>
<td>0.00002</td>
<td>3.86</td>
<td>4.32</td>
<td>0.10603</td>
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<tr>
<td>I can list the ingredients to mix a sanitizing solution for my reusable water bottle</td>
<td>1.74</td>
<td>3.23</td>
<td>0.01450</td>
<td>2.42</td>
<td>3.32</td>
<td>0.01293</td>
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</table>

*Note.* Two-tailed paired t-test compared mean middle school student water bottle skills and behaviors of the intervention (n=26) retrospective pre/post survey responses. A two-sample t-test (two-tails, unequal variances) compared the post-intervention (n=26) and control (n=39) mean responses. A Likert scale ranging from 1-5 ranked knowledge of topic addressed in the statement (1 = no knowledge to 5= a lot of knowledge).
Food Council and Extension Partnership Builds Food Literacy Using Experiential Food System Education
References


<table>
<thead>
<tr>
<th>Statement (attribute associated with food literacy)</th>
<th>Agree (#) %</th>
<th>Undecided (#) %</th>
<th>Disagree (#) %</th>
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<tbody>
<tr>
<td>I learned about more educational resources to inform my work (food and nutrition knowledge).</td>
<td>(22) 88%</td>
<td>(2)  8%</td>
<td>(1)  4%</td>
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<tr>
<td>I now have people I can contact who are passionate about this work (social capital; external factors).</td>
<td>(20) 80%</td>
<td>(3) 12%</td>
<td>(2)  8%</td>
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<tr>
<td>I gained more confidence to take action related to food systems (self-efficacy and confidence).</td>
<td>(19) 76%</td>
<td>(5) 20%</td>
<td>(1)  4%</td>
</tr>
<tr>
<td>I gained more confidence in knowing how food systems are affected in all aspects of my work (self-efficacy and confidence; external factors).</td>
<td>(23) 92%</td>
<td>(2)  8%</td>
<td>(0)  0%</td>
</tr>
</tbody>
</table>

Note. *one respondent did not attend the field trip and was excluded from this set of questions.
Online Tools for Extension Professionals to Help Families Talk about Race and Racism: A Resource List and Evaluation Method
References


<table>
<thead>
<tr>
<th>Table 1.</th>
<th></th>
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<tbody>
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<td><strong>Relevance Criteria</strong></td>
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<td></td>
<td>1. Website created for the public or a general audience. If the audience is not stated, then the site is written in plain language and does not include scientific jargon.</td>
</tr>
<tr>
<td></td>
<td>2. Website promotes anti-racism. Anti-racism is defined as the active dismantling of racist ideas, beliefs, and policies.</td>
</tr>
<tr>
<td></td>
<td>3. Website is free and is accessible by people in every U.S. state, Washington, D.C. and the territories.</td>
</tr>
<tr>
<td></td>
<td><em>Website was only included if all criteria were met.</em></td>
</tr>
<tr>
<td><strong>Credibility Criteria</strong></td>
<td><strong>Inclusion Criteria</strong></td>
</tr>
<tr>
<td></td>
<td>1. Website includes citations AND the sources cited are peer-reviewed articles, scholarly books, or U.S. governmental offices.</td>
</tr>
<tr>
<td></td>
<td>2. Website or individual articles on the website or sections of the website are written by, reference, or include quotes from experts. Experts are defined as individuals with advanced degrees in a relevant field or another relevant credential (e.g., employment at a university or in a U.S. governmental office).</td>
</tr>
<tr>
<td></td>
<td><em>Website was included if either criterion was met.</em></td>
</tr>
<tr>
<td><strong>Authority</strong></td>
<td><strong>Inclusion Criteria</strong></td>
</tr>
<tr>
<td></td>
<td>1. Website was created by a U.S. government office, professional association, or university AND contact information for the office, association or university is provided.</td>
</tr>
<tr>
<td></td>
<td>2. The authors of individual articles on the website or sections of the website are identified AND are experts. Experts are defined as individuals with advanced degrees in a relevant field or another relevant credential (e.g., employment at a university, relevant professional association, or in a U.S. government office).</td>
</tr>
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<td></td>
<td><em>Website was included if either criterion was met.</em></td>
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<td><strong>Objectivity</strong></td>
<td><strong>Inclusion Criteria</strong></td>
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<td></td>
<td>1. The intention or goal of the website is stated clearly</td>
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<tr>
<td></td>
<td>2. Language on the website appears to be free from bias.</td>
</tr>
<tr>
<td></td>
<td>3. No obvious conflicts of interest or commercial interests are identified.</td>
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<tr>
<td></td>
<td><em>Website was included only if all criteria were met.</em></td>
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<td><strong>Currency</strong></td>
<td><strong>Inclusion Criteria</strong></td>
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<tr>
<td></td>
<td>1. Website was published or updated after 2010.</td>
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<tr>
<td></td>
<td>2. Links on the website work (i.e., they are not dead links).</td>
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<td></td>
<td><em>Website was included only if both criteria were met.</em></td>
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<td><strong>Coverage</strong></td>
<td><strong>Inclusion Criteria</strong></td>
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<tr>
<td></td>
<td>1. No obvious gaps in what is covered based on the stated intention or goal of the site.</td>
</tr>
<tr>
<td></td>
<td><em>Website was included if this criterion was met.</em></td>
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<tr>
<td>Name</td>
<td>URL</td>
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<td><strong>Resources to Help Parents and Other Caregivers Talk to their Children About Race and Racism</strong></td>
<td></td>
</tr>
<tr>
<td>1.) Race Today: What Kids Know as They Grow (Module 13)</td>
<td>1.) <a href="https://modules.ilabs.uw.edu/module/race-today-what-kids-know-as-they-grow/">https://modules.ilabs.uw.edu/module/race-today-what-kids-know-as-they-grow/</a></td>
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<tr>
<td></td>
<td>and</td>
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<tr>
<td>2.) &quot;Racing&quot; Toward Equality: Why Talking to Your Kids About Race is Good for Everyone</td>
<td>2.) <a href="https://modules.ilabs.uw.edu/module/racing-towards-equality-why-talking-to-your-kids-about-race-is-good-for-everyone/">https://modules.ilabs.uw.edu/module/racing-towards-equality-why-talking-to-your-kids-about-race-is-good-for-everyone/</a></td>
</tr>
<tr>
<td><strong>RESilience, Uplifting Youth Through Healthy Communication About Race</strong></td>
<td><a href="https://www.apa.org/res">https://www.apa.org/res</a></td>
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<td><strong>Talking to Young Children About Race and Racism</strong></td>
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conversation with young children about race, racism, and being anti-racist."

<table>
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<tbody>
<tr>
<td><strong>1.) Books with Characters of Color</strong></td>
</tr>
<tr>
<td>These websites provide:</td>
</tr>
<tr>
<td>1.) a list of books that &quot;promote diversity and inclusion and teach readers about different cultures. And on top of that, they offer tons of positive role models, especially for kids of color.&quot;</td>
</tr>
<tr>
<td>Common Sense Media, a nonprofit organization whose mission is to provide technology and entertainment recommendations to parents, caregivers, and educators. Also conducts advocacy work around protecting consumer privacy and increased internet access and holding &quot;tech companies accountable to ensure a healthy internet for all.&quot;</td>
</tr>
</tbody>
</table>

| **Diverse Book Finder**                                      | **Where to Find Diverse Books**                              |
| [https://diversebookfinder.org/](https://diversebookfinder.org/) | [https://diversebooks.org/resources-old/where-to-](https://diversebooks.org/resources-old/where-to-) |
| "The Diverse BookFinder is a comprehensive collection of children's picture books featuring Black and Indigenous people and People of Color (BIPOC). [They have] cataloged and analyzed trade picture books fitting this criteria [sic], published since 2002, to surface and create: a unique circulating collection, a search tool, and a source of critical data." | "A list of websites that offer recommendations for diverse titles. [The] list is not exhaustive." |
| Faculty and students from Bates College and a children's book author | We Need Diverse Books, a non-profit whose mission is to help children find and access books with Parents and other caregivers, librarians, and educators looking for books for children in grades K-3 |

<table>
<thead>
<tr>
<th><strong>Parents and other caregivers, librarians, and educators looking for books for children of all ages</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><a href="https://diversebooks.org/resources-old/where-to-">https://diversebooks.org/resources-old/where-to-</a></td>
</tr>
</tbody>
</table>
find-diverse-books/diverse characters founded and run by a team that includes children's book authors, educators, and librarians.

<table>
<thead>
<tr>
<th>Resources to Help Adults and Adolescents Better Understand Race, Racism, and Anti-racist Work</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Project Implicit</strong></td>
</tr>
<tr>
<td>Project Implicit is a non-profit organization and international collaboration between researchers who are interested in implicit social cognition - thoughts and feelings outside of conscious awareness and control. The goal of the organization is to educate the public about hidden biases and to provide a “virtual laboratory” for collecting data on the Internet.&quot;</td>
</tr>
</tbody>
</table>

| Racial Equity Tools | [https://www.racialequitytools.org/](https://www.racialequitytools.org/) | This website offers "tools, research, tips, curricula, and ideas for people who want to increase their own understanding and to help those working for racial justice at every level – in systems, organizations, communities, and the culture at large." |
| Racial Equity Tools was created when three websites merged: racialequitytools.org/, evaluationtoolsforracialequity.org, racialequitylearning.org. | All teens and adults |
| Resources to Better Understand Race, Racism, and Policing | https://news.ucr.edu/articles/2020/06/09/resources-better-understand-race-racism-and-policing | "In the wake of the tragic death of George Floyd in Minneapolis police custody, we asked faculty and staff members at the University of California, Riverside, who study race, racism, policing, and incarceration to offer their recommendations for resources to learn more about these issues in the U.S. The following list of media — which will be updated on an ongoing basis to reflect new submissions — so far features the input of 10 members of the UCR community." | 10 members of the University of California, Riverside community, including faculty, graduate students, and researchers. | All teens and adults |
Innovative Approaches to Health and Wellness: Intuitive Eating and Mindful Eating
References


at [https://www.researchgate.net/publication/317817795_A_Conversation_Tool_for_Assessing_a_Food_Pantry’s_Readiness_to_Address_Diet-Related_Chronic_Diseases](https://www.researchgate.net/publication/317817795_A_Conversation_Tool_for_Assessing_a_Food_Pantry’s_Readiness_to_Address_Diet-Related_Chronic_Diseases)

The Center for Mindful Eating (n.d.-a). *Introduction to mindful eating.*

[https://thecenterformindfuleating.org/page-1863947](https://thecenterformindfuleating.org/page-1863947)


Tribole, E., & Resch, E. (2019). *How to become a certified Intuitive Eating counselor or lay facilitator.*


Table 1

**Definitions and Guiding Principles of Innovative Approaches: Intuitive Eating and Mindful Eating**

<table>
<thead>
<tr>
<th>Approach</th>
<th>Definition and Guiding Principles</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>Intuitive Eating</td>
<td>IE is an anti-dieting movement suggesting people are born with an innate mechanism to eat in a way that supports nutrition, health, and an appropriate weight while avoiding overeating, obsessing over foods, harmful dieting, or mindless eating. The ten guiding principles focus on rejecting the diet mentality, recognizing and responding to hunger, fullness, and satisfaction cues, choosing foods based on physical promptings rather than avoiding taboo foods, and valuing the health and energy of the body over the rewards of an attractive appearance.</td>
<td>Tribole &amp; Resch, 2020</td>
</tr>
<tr>
<td>Mindful Eating</td>
<td>ME is a form of mindfulness applied to the eating experience. It involves using all five senses to choose foods and beverages that satisfy and nourish the body. This practice helps an individual recognize their likes, dislikes, or neutral feelings about what they are eating or drinking without judgment. It helps them tune into hunger and satiety cues, allowing an individual to dictate when to begin eating and when to stop eating. This tool can help a person become an Intuitive Eater.</td>
<td>The Center for Mindful Eating, n.d.-a</td>
</tr>
<tr>
<td>Concerns, Support, and Suggestions</td>
<td>Example Quotes</td>
<td></td>
</tr>
<tr>
<td>-----------------------------------</td>
<td>---------------</td>
<td></td>
</tr>
<tr>
<td>Vulnerable or At-Risk Populations</td>
<td>Does your organization feel [NAME] County’s communities would be interested in learning more about Intuitive Eating?</td>
<td>Does your organization feel [NAME] County’s communities would be interested in learning more about mindful eating?</td>
</tr>
<tr>
<td>Key informant 001: “How do you get to those demographic of people who don't have the means or access to healthy foods to try to understand Intuitive Eating? So you have these pockets in St. Mary’s County of demographics, of individuals that are low income, okay? And they can't afford to buy organic … they’re barely getting by on whatever groceries they can. So they're choosing things in a box, in a bag, and all that. So how are you going to talk to them about Intuitive Eating when they don’t have the access to that, those kinds of foods?”</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Key informant 003: “Again, I think it depends. Same situation. I don’t think that some of our most vulnerable folks are in a position where they can focus on that.”</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Key informant 003: “I think it's hard to prioritize some of the stuff when you don't know where your next meal is coming from, so it would be lost on a population that is struggling too.”</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Key informant 011: “… folks that are just looking for food, they say they’re not going to care about mindful eating … unfortunately, the ones that need it the most, sometimes, are the ones that aren't getting that information.”</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Renaming the Approach</td>
<td>Key informant 008: “I think so if it was called something else … I think that might scare some people, but it makes perfect sense.”</td>
<td></td>
</tr>
<tr>
<td>Key informant 008: “I still don't think people in this area would sign up for something that's called mindful eating because they're going to think it's yoga, or Zen, or something like that.”</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Improving Receptivity

Key informant 006: “... it's going with your gut... ‘You already have this inside of you.’ And I think that might be a benefit for people versus coming in saying, ‘You don't have any idea what you know.’ Versus the opposite of it, is, ‘You actually have it all inside of you all right now.’”

Key informant 005: "... some folks that really just want to eat the fried foods and don't want to participate in anything that might make them have to change their ways of life that they enjoy whether or not it's good for them. Even if they know it's not good for them ... I think some folks - and this is just my anecdotal experience - might resist it based on assumptions they would make about it. But if the message were delivered enough times in enough ways that they would accept it ... some of our lower income, black communities if their churches were on board [they might be too] ... Coming from the county government or the education system, it's one thing. But when it's sort of from trusted neighbors and community, the

So I think our population definitely wouldn't go for something called mindful eating. I think they would be interested in the subject matter, but not if it's called mindful eating.”

Key informant 006: “I think so, but I think people know what they like... I know I like doughnuts. I know I'll overeat doughnuts... So maybe less on like and more on ‘what healthy options do you pick for yourself that you like... Let's focus on what you like that can benefit your body.’”

Key informant 007: “Yeah ... even if they aren't as receptive to it right away. And I think a lot of that comes from just not really understanding or it just being a really big issue ... But I think if you can provide people with new tools and new ways to understand healthy eating, I'm all for that.”
informal community leaders, the lady everyone listens to more so than the mayor ... There's portions of our population that don't necessarily have that trust in traditional authority but are very in tune with their community."

Interested Populations

Key informant 003: “I think a subset would. Well, I think younger, more educationally advanced in terms of socioeconomics.”

Key informant 007: “I think there are certain pockets of our population that would be very interested in it, but I don't think that they're the most at risk ... a lot of the athletic, crunchy granola moms out there would be interested in that ... That would be your target audience there. Now, are they the most at risk? I don't think so. But I think it definitely sounds very interesting and I think you can always try. I don't know ... I do think that you would have people interested in learning about that, for sure.”

Health Benefits

Key informant 002: “So the influence that things like stress, sleep deprivation, or chronic stress, chronic sleep deprivation, and anxiety, depression, et cetera, have on food choices and food consumption, but then also the impact that quality of and

Key informant 005: “Potentially. There are some groups that would be very open to it because they're open to anything sort of labeled mindfulness or kind of in that vein ... so I think there’s openness to it.”

Key informant 007: “I think it's great. Give people options. They might have tried going on a diet or a specific way of eating that hasn't been successful for them. So they might be ready or willing to try something new and different. And I
types of food choices and overall nutrition-- the impact that has on stress and managing stress, social emotional development and overall behavioral health. So I definitely think that is an area that needs to be explored more.”

Key informant 009: “Absolutely ... So much of the emphasis has been on dieting, but it's about changing a lifestyle. And what you're talking about is basing it on healthy eating and not on how to diet. You have all these people going through this keto and all this other stuff that's trending rather than looking at what's your body telling you regarding what you should eat, when you should eat it, and the needs of the body. And I think once we start listening to our body regarding nutrition, we're listening to our body regarding a number of other things.”

I think when you really are talking about mindfulness in general, I think that that can be really good as far as having a lot of mental health benefits as well, which everyone in our community could benefit from.”

*Note.* Key informants were randomly assigned a number to maintain confidentiality. This table represents a selection of quotes that capture a summary of concerns, supportive thoughts, and suggestions.
COVID-19 Messaging Campaigns Show Impact and Reach Through Strong Collaborations
References


Table 1

Demographics of Target Counties Compared with State of Utah and the United States, 2019 Estimates

<table>
<thead>
<tr>
<th>County</th>
<th>Total Population</th>
<th>Youth (under 18)</th>
<th>Seniors (65+)</th>
<th>White</th>
<th>Black/African American</th>
<th>American Indian/Alaskan Native</th>
<th>Asian</th>
<th>Native Hawaiian/Pacific Islander</th>
<th>Hispanic/Latino</th>
<th>Multi-racial (2+ races)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Salt Lake</td>
<td>1,160,437</td>
<td>33.8</td>
<td>11.2</td>
<td>70.3</td>
<td>2.2</td>
<td>1.4</td>
<td>4.6</td>
<td>1.8</td>
<td>18.8</td>
<td>2.9</td>
</tr>
<tr>
<td>Morgan</td>
<td>12,124</td>
<td>41.7</td>
<td>11.9</td>
<td>94.4</td>
<td>0.5</td>
<td>0.4</td>
<td>0.6</td>
<td>0.2</td>
<td>3.2</td>
<td>1.1</td>
</tr>
<tr>
<td>Davis</td>
<td>9,000</td>
<td>38.4</td>
<td>17.7</td>
<td>96.6</td>
<td>0.2</td>
<td>0.3</td>
<td>0.3</td>
<td>0.0</td>
<td>1.7</td>
<td>1.0</td>
</tr>
<tr>
<td>Box Elder</td>
<td>56,046</td>
<td>39.2</td>
<td>13.2</td>
<td>86.7</td>
<td>0.6</td>
<td>1.1</td>
<td>0.8</td>
<td>0.2</td>
<td>9.7</td>
<td>2.1</td>
</tr>
<tr>
<td>Cache</td>
<td>128,289</td>
<td>38.3</td>
<td>9.8</td>
<td>83.5</td>
<td>1.1</td>
<td>1.1</td>
<td>2.3</td>
<td>0.5</td>
<td>10.9</td>
<td>2.1</td>
</tr>
<tr>
<td>Washington</td>
<td>177,556</td>
<td>22.1</td>
<td>22.0</td>
<td>83.8</td>
<td>0.9</td>
<td>1.7</td>
<td>1.0</td>
<td>0.9</td>
<td>10.9</td>
<td>2.2</td>
</tr>
<tr>
<td>Iron</td>
<td>54,839</td>
<td>25.8</td>
<td>12.9</td>
<td>85.8</td>
<td>0.7</td>
<td>2.4</td>
<td>1.0</td>
<td>0.4</td>
<td>8.9</td>
<td>2.1</td>
</tr>
<tr>
<td>Weber</td>
<td>260,213</td>
<td>25.3</td>
<td>11.9</td>
<td>75.6</td>
<td>1.7</td>
<td>1.4</td>
<td>1.6</td>
<td>0.4</td>
<td>18.7</td>
<td>2.7</td>
</tr>
<tr>
<td>Utah</td>
<td>636,235</td>
<td>32.1</td>
<td>7.9</td>
<td>81.7</td>
<td>0.8</td>
<td>0.8</td>
<td>1.9</td>
<td>0.9</td>
<td>12.2</td>
<td>2.8</td>
</tr>
<tr>
<td>Utah (State)</td>
<td>3,205,958</td>
<td>36.7</td>
<td>11.4</td>
<td>77.8</td>
<td>1.5</td>
<td>1.6</td>
<td>2.7</td>
<td>1.1</td>
<td>14.4</td>
<td>2.6</td>
</tr>
<tr>
<td>United States</td>
<td>328,395,523</td>
<td>28.6</td>
<td>16.5</td>
<td>60.1</td>
<td>13.4</td>
<td>1.3</td>
<td>5.9</td>
<td>0.2</td>
<td>18.5</td>
<td>2.8</td>
</tr>
</tbody>
</table>
### Table 2

**Distribution and Reach of COVID-19 Creatives**

<table>
<thead>
<tr>
<th>Location</th>
<th>Type of Marketing</th>
<th>Estimated Reach</th>
<th>% of Total Reach</th>
</tr>
</thead>
<tbody>
<tr>
<td>Facebook</td>
<td>USU-specific pages</td>
<td>18,678</td>
<td>0.63</td>
</tr>
<tr>
<td>Instagram</td>
<td>USU-specific pages</td>
<td>12,085</td>
<td>0.41</td>
</tr>
<tr>
<td>Twitter</td>
<td>USU-specific pages</td>
<td>8,672</td>
<td>0.29</td>
</tr>
<tr>
<td>Latino grocery stores, food distribution sites, campus</td>
<td>Flyers, posters, magnets, and electronic PDF versions</td>
<td>77,688</td>
<td>2.62</td>
</tr>
<tr>
<td>Utah Public Radio – English and Spanish</td>
<td>Radio PSA (6)</td>
<td>200,000</td>
<td>6.74</td>
</tr>
<tr>
<td>Latino radio stations</td>
<td>Radio PSA’s (3)</td>
<td>8,500</td>
<td>0.29</td>
</tr>
<tr>
<td>Facebook – English and Spanish</td>
<td>External FB paid ads</td>
<td>13,196</td>
<td>0.44</td>
</tr>
<tr>
<td>November - December Web ads</td>
<td>External paid ads inserted on premium news websites</td>
<td>2,630,011</td>
<td>88.59</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td></td>
<td><strong>2,968,830</strong></td>
<td><strong>100</strong></td>
</tr>
<tr>
<td>Billboard&lt;sup&gt;a&lt;/sup&gt;</td>
<td>Electronic billboard along high-traffic route</td>
<td>2,500,000</td>
<td></td>
</tr>
</tbody>
</table>

<sup>a</sup>Billboard reach was not included in the total due to less direct opportunities for engagement compared to the other marketing mediums used.
Table 3

**Demographics of COVID-19 Survey Respondents (N = 325)**

<table>
<thead>
<tr>
<th>Characteristic</th>
<th>Respondents</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>n</td>
</tr>
<tr>
<td><strong>Gender</strong></td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td>106</td>
</tr>
<tr>
<td>Female</td>
<td>217</td>
</tr>
<tr>
<td><strong>Age, years</strong></td>
<td></td>
</tr>
<tr>
<td>18-24</td>
<td>52</td>
</tr>
<tr>
<td>25-34</td>
<td>90</td>
</tr>
<tr>
<td>35-44</td>
<td>71</td>
</tr>
<tr>
<td>45-54</td>
<td>37</td>
</tr>
<tr>
<td>55-64</td>
<td>29</td>
</tr>
<tr>
<td>65-74</td>
<td>37</td>
</tr>
<tr>
<td>75-84</td>
<td>8</td>
</tr>
<tr>
<td>85 or older</td>
<td>1</td>
</tr>
<tr>
<td><strong>Race</strong></td>
<td></td>
</tr>
<tr>
<td>White</td>
<td>281</td>
</tr>
<tr>
<td>Black or African American</td>
<td>4</td>
</tr>
<tr>
<td>American Indian or Alaska Native</td>
<td>4</td>
</tr>
<tr>
<td>Asian</td>
<td>16</td>
</tr>
<tr>
<td>Native Hawaiian or Pacific Islander</td>
<td>1</td>
</tr>
<tr>
<td>Other</td>
<td>17</td>
</tr>
<tr>
<td><strong>Ethnicity</strong></td>
<td></td>
</tr>
<tr>
<td>Hispanic</td>
<td>33</td>
</tr>
<tr>
<td>Non-Hispanic</td>
<td>292</td>
</tr>
</tbody>
</table>
Appendix A
Example of Posters Created in English, Spanish, and Navajo Languages

Messaging promotes protecting others and oneself by following physical distancing guidelines.
Fall and Winter themes and holiday-specific messages were created and translated in English and Spanish languages.

Halloween themed creative distributed in October 2020

Thanksgiving themed creative distributed in November 2020

Christmas themed creative distributed in December 2020
Christmas themed creative distributed in December 2020

Creatives in English and Spanish languages distributed in November and December 2020

Creative distributed in December 2020
Creatives in English and Spanish languages distributed in November and December 2020

Creative distributed in November and December 2020

Creatives distributed in December 2020
Appendix C
Examples of Radio PSAs in English and Spanish Languages

KNIV 104.6 FM Mi Preferida and KEGH 107.1 FM Placer Latino radio stations – Pre-recorded and aired 10 times per day for four weeks

Radio Spot 45 sec. #1 COVID-19 Prevention
Ayuda a detener la propagación del coronavirus
Si tienes fiebre, tos,
dolor de garganta, escalofríos,
dificultad para respirar y
pérdida del sentido del olfato o del gusto
mantente alejado de otros y
hazte la prueba
Este es un mensaje del programa de Extension de USU
Búscanos en la pagina
Stayhappystayhealthy.usu.edu

Radio Spot 45 sec. #2 COVID-19 Protection
Protégete del coronavirus observando las siguientes recomendaciones
Mantente a distancia de otros
Usa cubre bocas
Evita saludar de mano o beso y
Lávate las manos con frecuencia
Recuerda también que tu mejor defensa
es mantenerte saludable
Este es un mensaje del programa de Extension de USU
Búscanos en la pagina
Stayhappystayhealthy.usu.edu
Utah Public Radio available state-wide – Read live 8 times per day for five weeks

Radio spots (3), 15 seconds each (also translated into and read in Spanish)

1. Usu extension's stay happy stay healthy campaign. The pandemic has caused confusion and uncertainty, and it is easy to become anxious and skeptical. A positive attitude can help in times of stress. Tips available at stay happy stay healthy dot usu dot edu

2. Usu extension’s stay happy stay healthy campaign. During this holiday season, stay connected in safe and innovative ways, like making front porch visits or sending care packages to loved ones. More tips available at stay happy stay healthy dot usu dot edu

3. Usu extension’s stay happy stay healthy campaign. Taking care of your physical and mental health is essential during the pandemic. Remember to keep your cup full with relaxing and meaningful activities. Tips available at stay happy stay healthy dot usu dot edu
Food, Fun and Reading: Pilot Study of Updated and Expanded Preschool Curriculum
References


Demographic Characteristics of Fun & Reading Parent Survey

Table 1.

<table>
<thead>
<tr>
<th>Demographics</th>
<th>Parent Responses as a Percentage of the Sample (n = 31)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gender of Child</td>
<td></td>
</tr>
<tr>
<td>Female</td>
<td>61</td>
</tr>
<tr>
<td>Male</td>
<td>39</td>
</tr>
<tr>
<td>Age of Child</td>
<td></td>
</tr>
<tr>
<td>Less than 3 years old</td>
<td>24</td>
</tr>
<tr>
<td>3–4 years old</td>
<td>34</td>
</tr>
<tr>
<td>5–6 years old</td>
<td>24</td>
</tr>
<tr>
<td>7 years old</td>
<td>17</td>
</tr>
<tr>
<td>Not reported</td>
<td>1</td>
</tr>
<tr>
<td>Race of Child</td>
<td></td>
</tr>
<tr>
<td>American Indian/Alaska Native</td>
<td>7</td>
</tr>
<tr>
<td>Asian</td>
<td>0</td>
</tr>
<tr>
<td>Black/African American</td>
<td>0</td>
</tr>
<tr>
<td>Native Hawaiian or Pacific Islander</td>
<td>0</td>
</tr>
<tr>
<td>White</td>
<td>90</td>
</tr>
<tr>
<td>Ethnicity of Child</td>
<td></td>
</tr>
<tr>
<td>Non-Hispanic</td>
<td>74</td>
</tr>
</tbody>
</table>

Income Indicators

Worried or stressed about having enough money for nutritious meals in the past 12 months
- All Months: 4
- Some Months: 32
- Never: 61
- Not reported: 3

Received benefits from federal food assistance program in the past 12 months
- All Months: 14
- Some Months: 7
- Never: 79
### Changes in Nutrition-Related Behaviors in Child and Adult Participants

#### Table 2.
Table 2 Summary: Statistically significant increase in the frequency of children talking about healthy foods and in the consumption of vegetables, whole grains, and lean protein after participating in the program lessons. There was also a statistically significant increase in parents preparing healthy foods from the MyPlate food groups after program participation.

<table>
<thead>
<tr>
<th>Retrospective Pre/Post Parent Survey</th>
<th>Pretest</th>
<th>Posttest</th>
<th>P-Value</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>n</td>
<td>Mean (SD)</td>
<td>Median (IQR)</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Questions&lt;sup&gt;a&lt;/sup&gt;</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>How often has your child talked about healthy foods?</td>
<td>29</td>
<td>2.77 (1.07)</td>
<td>3.00 (2, 3.25)</td>
</tr>
<tr>
<td>How often has your child eaten the following healthy foods?</td>
<td>28</td>
<td>3.71 (1.04)</td>
<td>4.00 (3, 5)</td>
</tr>
<tr>
<td></td>
<td>30</td>
<td>4.03 (0.89)</td>
<td>4.00 (3.75, 5)</td>
</tr>
<tr>
<td>Vegetables...........................</td>
<td>24</td>
<td>4.21 (0.79)</td>
<td>4.00 (4, 5)</td>
</tr>
<tr>
<td>Fruits...............................</td>
<td>30</td>
<td>4.53 (.629)</td>
<td>5.00 (4, 5)</td>
</tr>
<tr>
<td>Whole grains.........................</td>
<td>28</td>
<td>4.32 (.65)</td>
<td>4.00 (4, 5)</td>
</tr>
<tr>
<td>Lean protein.........................</td>
<td>30</td>
<td>4.00 (.659)</td>
<td>4.00 (4, 5)</td>
</tr>
<tr>
<td>Dairy.................................</td>
<td></td>
<td>4.61 (.50)</td>
<td>5.00 (4, 5)</td>
</tr>
<tr>
<td>I prepare healthy foods for meals and snacks.</td>
<td></td>
<td>4.33 (.482)</td>
<td>4.00 (4, 5)</td>
</tr>
</tbody>
</table>

*Healthy foods* in the questions refer to fruits, vegetables, whole grains, lean protein, and dairy. P < 0.05 is considered significant; SD is standard deviation; IQR is interquartile range.

<sup>a</sup>Values are mean and standard deviation from a Likert scale (1 = never, 2 = seldom, 3 = sometimes, 4 = usually, 5 = always). Comparisons performed using a Wilcoxon Signed Rank Test.
Best Practice Food Safety Standard Operating Procedures for Share Tables Can Reduce Food Waste While Improving Food Security During COVID-19 and Beyond
References


Minnesota Department of Education. (n.d.). *Redistribution of Returned Food/Share Tables Sample HACCP-Based Standard Operating Procedure (SOP).*


Missouri Department of Elementary & Secondary Education. HACCP-Based SOPs; Share Table (Sample SOP). (n.d.). https://dese.mo.gov/media/pdf/haccp-based-sop-share-table


New York State Education Department & New York State Department of Health. (n.d.). *Sharing Tables; Food Safety at Sharing Tables.*


https://scdhec.gov/sites/default/files/Library/OR-1522.pdf


Wisconsin Department of Public Instruction. (2019, November n.d.). *Sharing and No Thank You Table Toolkit for Schools Participating in the School Nutrition Programs.*

[https://dpi.wi.gov/sites/default/files/imce/school-nutrition/sharing-no-thank-you-toolkit.docx](https://dpi.wi.gov/sites/default/files/imce/school-nutrition/sharing-no-thank-you-toolkit.docx)

### Table 1

**Department of Origin of State Share Table Policies Reviewed**

<table>
<thead>
<tr>
<th>State</th>
<th>Department of Origin</th>
</tr>
</thead>
<tbody>
<tr>
<td>Arizona</td>
<td>Department of Education Only</td>
</tr>
<tr>
<td>California</td>
<td>Department of Education</td>
</tr>
<tr>
<td>Colorado</td>
<td>Department of Education Only</td>
</tr>
<tr>
<td>Minnesota</td>
<td>Department of Education</td>
</tr>
<tr>
<td>Missouri</td>
<td>Department of Education Only</td>
</tr>
<tr>
<td>Nebraska</td>
<td>Department of Education</td>
</tr>
<tr>
<td>Alaska</td>
<td>Department of Education &amp; Early Development Department of Environmental Conservation</td>
</tr>
<tr>
<td>Connecticut</td>
<td>Department of Education &amp; Department of Public Health</td>
</tr>
<tr>
<td>Georgia</td>
<td>Department of Education &amp; Department of Public Health</td>
</tr>
<tr>
<td>Iowa</td>
<td>Department of Education Bureau of Nutrition and Health, Department of Inspections and Appeals, &amp; Iowa State University Human Sciences Extension &amp; Outreach</td>
</tr>
<tr>
<td>New York</td>
<td>Department of Education &amp; Department of Health</td>
</tr>
<tr>
<td>South Carolina</td>
<td>Department of Education &amp; Department of Health and Environmental Control (DHEC)</td>
</tr>
<tr>
<td>Kansas</td>
<td>Department of Education &amp; Department of Agriculture</td>
</tr>
<tr>
<td>New Jersey</td>
<td>Department of Environmental Protection Department of Agriculture Department of Education Department of Health Office of the Secretary of Higher Education</td>
</tr>
<tr>
<td>Wisconsin</td>
<td>Department of Public Instruction</td>
</tr>
<tr>
<td>Indiana</td>
<td>Department of Health</td>
</tr>
<tr>
<td>Maine</td>
<td>Department of Health and Human Services</td>
</tr>
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</table>
Table 2  
*U.S. Share Table Policies Reviewed*

<table>
<thead>
<tr>
<th>State</th>
<th>Citation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alaska</td>
<td>Alaska Department of Environmental Conservation and Alaska Department of</td>
</tr>
<tr>
<td></td>
<td><a href="https://www.cde.state.co.us/nutrition/osnfoodsafetyresources-0">https://www.cde.state.co.us/nutrition/osnfoodsafetyresources-0</a></td>
</tr>
</tbody>
</table>
| Indiana    | Indiana State Department of Health. (2015, December 23). *Guidance on Schools and Other Facilities Implementing “Sharing Tables” and “Food Recovery” Programs Recommended by USDA*.  
<table>
<thead>
<tr>
<th>State</th>
<th>Agency/Department</th>
<th>Year</th>
<th>Document Title</th>
<th>Link</th>
</tr>
</thead>
<tbody>
<tr>
<td>Iowa</td>
<td>Iowa Department of Education Bureau of Nutrition and Health, Iowa</td>
<td>2016</td>
<td>Standard Operating Procedure Food Donations and Sharing Tables in School Meals Program.</td>
<td><a href="https://www.extension.iastate.edu/foodsafety/haccp-school-foodservice">https://www.extension.iastate.edu/foodsafety/haccp-school-foodservice</a></td>
</tr>
<tr>
<td>Kansas</td>
<td>Kansas Department of Education &amp; Kansas Department of Agriculture</td>
<td>2018</td>
<td>Standard Operating Procedure (SOP) Returned Food and Re-service of Food/Share Tables.</td>
<td><a href="https://www.kn-eat.org/CACFP/CACFP_Docs/Resources_At-Risk_Afterschool_Meals/SOP_Share_Table_August_2018.docx">https://www.kn-eat.org/CACFP/CACFP_Docs/Resources_At-Risk_Afterschool_Meals/SOP_Share_Table_August_2018.docx</a></td>
</tr>
<tr>
<td>Missouri</td>
<td>Missouri Department of Elementary &amp; Secondary Education. HACCP-Based SOPs; Share Table (Sample SOP).</td>
<td>n.d.</td>
<td></td>
<td><a href="https://dese.mo.gov/media/pdf/haccp-based-sop-share-table">https://dese.mo.gov/media/pdf/haccp-based-sop-share-table</a></td>
</tr>
</tbody>
</table>
Figure 1
Legislative Level of Share Table Policies Reviewed
Organizing Extension Family and Consumer Sciences Groups Around a Common Topic: Lessons Learned and Best Practices
References


<table>
<thead>
<tr>
<th>Question Categories</th>
<th>Sub-categories</th>
<th>Response Themes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Professional Development</td>
<td>Motivation</td>
<td>Helping others</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Personal fulfillment</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Overcoming ignorance</td>
</tr>
<tr>
<td></td>
<td>Impact</td>
<td>Working together</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Personal development</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Results achieved</td>
</tr>
<tr>
<td></td>
<td>Mentoring</td>
<td>Mutual mentorship</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Mentor/Mentee relationship</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Need for mentorship</td>
</tr>
<tr>
<td>Program Development</td>
<td>Audiences</td>
<td>General, larger demographic</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Specific, small demographic</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Not- or under-served groups</td>
</tr>
<tr>
<td></td>
<td>Problems</td>
<td>General food safety</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Specific food safety/COVID</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Overcoming ignorance</td>
</tr>
<tr>
<td></td>
<td>Solutions</td>
<td>General applications</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Specific applications/COVID</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Evaluation tool use</td>
</tr>
<tr>
<td>Program Impact</td>
<td>Assessment</td>
<td>Evaluation tool</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Personal appreciation</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Variety of successes listed</td>
</tr>
<tr>
<td></td>
<td>State Impact</td>
<td>General teamwork</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Specific programs/COVID</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Evaluation tool used</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Overcoming ignorance</td>
</tr>
<tr>
<td>Food Safety Education</td>
<td>Benefits of teamwork</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Specific programming</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Results needed</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Overcoming ignorance</td>
</tr>
</tbody>
</table>
### Table 2

**Results from Interview Questions: ‘Where We’re Going’**

<table>
<thead>
<tr>
<th>Question Categories</th>
<th>Sub-categories</th>
<th>Response Themes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Food Safety Topics</td>
<td>Biggest Issue</td>
<td>Variety of topics</td>
</tr>
<tr>
<td></td>
<td></td>
<td>COVID related topics</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Overcoming ignorance</td>
</tr>
<tr>
<td></td>
<td>New Topics/Role</td>
<td>Variety of topics</td>
</tr>
<tr>
<td></td>
<td></td>
<td>COVID related topics</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Overcoming ignorance</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Team member’s role</td>
</tr>
<tr>
<td>Communication</td>
<td>Decision-Making</td>
<td>General – why team works</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Specific actions employed</td>
</tr>
<tr>
<td></td>
<td>Improving Communication</td>
<td>General – what works</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Specific – needs work</td>
</tr>
<tr>
<td></td>
<td></td>
<td>No improvements needed</td>
</tr>
<tr>
<td>Change</td>
<td>Longevity</td>
<td>How and why team works</td>
</tr>
<tr>
<td></td>
<td>Goals/Planning</td>
<td>Changing membership</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Cautions and needs</td>
</tr>
<tr>
<td></td>
<td></td>
<td>General ideas about change</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Specific action items</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Implications in lieu of COVID</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Yes to strategic planning</td>
</tr>
<tr>
<td></td>
<td></td>
<td>No to strategic planning</td>
</tr>
<tr>
<td>Extras</td>
<td>Final Comments</td>
<td>General – team functioning</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Specific – team activities</td>
</tr>
<tr>
<td></td>
<td>Points of Interest (POIs)</td>
<td>Comments related to COVID</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Organizational obstacles</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Trend – tapping of Extension</td>
</tr>
<tr>
<td></td>
<td></td>
<td>by other organizations</td>
</tr>
</tbody>
</table>
Testing Multiple Educational Delivery Methods with Rural Audiences: Lessons Learned
References


https://tigerprints.clemson.edu/joe/vol52/iss2/18

<table>
<thead>
<tr>
<th>Dining with Diabetes Session 1 Component</th>
<th>Face-to-Face</th>
<th>Online</th>
<th>Hybrid</th>
<th>Written Information Only</th>
</tr>
</thead>
<tbody>
<tr>
<td>Diabetes Self-Management Information</td>
<td>In-person instruction</td>
<td>Canvas module</td>
<td>Canvas module</td>
<td>Either paper or electronic copy of presentation</td>
</tr>
<tr>
<td>Cooking Demonstration</td>
<td>In-person demonstration</td>
<td>Canvas video</td>
<td>In-person demonstration</td>
<td>Either paper or electronic copy of recipe and educator talking points</td>
</tr>
</tbody>
</table>
Table 2

Face-to-Face, Online, and Hybrid Groups’ Satisfaction with and Ease of Accessing In-Person and/or Online Components

<table>
<thead>
<tr>
<th>Group</th>
<th>Satisfaction with Group Assignment</th>
<th>Ease of Accessing In-Person and/or Online Components</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Very Dissatisfied</td>
<td>Dissatisfied</td>
</tr>
<tr>
<td>Face-to-Face</td>
<td>0%</td>
<td>0%</td>
</tr>
<tr>
<td>Online</td>
<td>0%</td>
<td>0%</td>
</tr>
<tr>
<td>Hybrid In-Person Demonstration</td>
<td>0%</td>
<td>0%</td>
</tr>
<tr>
<td>Hybrid Canvas Module</td>
<td>0%</td>
<td>10%</td>
</tr>
</tbody>
</table>

Note. Data missing for those in the Face-to-Face Group included 11% for class satisfaction and 11% for ease of accessing the in-person component. Data missing for those in the Hybrid group included 5% for satisfaction participating in the in-person demonstration, 24% for satisfaction participating in the Canvas module, and 24% for ease of accessing the Canvas module. The Written Information Only Group is not included in this table because these questions only applied to those who received in-person or online instruction.
Best Practices in Recipe Demonstration Videos for Extension Professionals
References


https://archives.joe.org/joe/1985spring/a5.php


https://digitalcommons.csbsju.edu/ur_cscday/33/


https://www.neafcs.org/assets/documents/journal/2012-jneafcs.pdf


### Tables

**Table 1**

*Recipe Demonstration Video Research and Impact*

<table>
<thead>
<tr>
<th>Research</th>
<th>Research Goals</th>
<th>Research Subjects</th>
<th>Video Style(s)</th>
<th>Video Length(s)</th>
<th>Results</th>
</tr>
</thead>
<tbody>
<tr>
<td>Danforth et al., 2012</td>
<td>“...to determine which vodcast format was best suited to increase nutrition knowledge, interest, and intention to use a cancer preventing food.”</td>
<td>Cancer patients</td>
<td>Three separate styles 1. Nutrition and preparation for one food 2. Quick recipe demonstration 3. Long recipe demonstration</td>
<td>2-11.5 minutes</td>
<td>“Participants preferred to see a recipe demonstrated and the best knowledge scores were seen in a 4-6 minute vodcast.”</td>
</tr>
</tbody>
</table>
| Fitz et al., 2017 | 1. “...examine the feasibility of creating and implementing survivor-specific cooking videos, and 2. determine participant satisfaction and perceptions of the videos, recipes, and delivery format.” | Cancer patients | Dietitian-led cooking demonstrations in a home kitchen. Videos were narrated by the dietitian with on-screen text. | >5 minutes      | “The implementation of online cooking videos was feasible and acceptable.”  
“91% stated that they were more likely to consume a primarily plant-based diet after watching the videos.”  
“...93% reported that they enjoyed the videos, 95% stated that the videos were informative, 95% perceived the cooking techniques to be user-friendly, and 88% found the nutrient analysis beneficial.” |
<p>| Flores et al., 2003 | “To improve the diets of the target population while utilizing traditional ethnic cooking approaches whenever possible.” | Women, Infants, and Children (WIC) Hispanic families | “...filmed in Spanish and feature Latino actors preparing dishes common to Hispanic families...”  “The videos use a variety of techniques to highlight step-by-step instructions...” |                |                                                                                                                                           |
| Fortmeyer, 2018 | “…to determine the effectiveness and utilization of visual food demonstrations by CSA members...” | Members of a Community Supported Agriculture (CSA) | Recipe demonstration videos |                | “Although participants who watched found the videos helpful, for the majority it did not translate into making the recipe or referring more to the newsletter recipes.” |</p>
<table>
<thead>
<tr>
<th>Study</th>
<th>Methodology</th>
<th>Participants</th>
<th>Duration</th>
<th>Findings</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hutchings &amp; Hoffman, 2019</td>
<td>“Utilizing social media as a stand-alone educational method...”</td>
<td>Members of the public</td>
<td>15 minutes</td>
<td>“An average of 70%... reported that they put their knowledge into practice.”</td>
</tr>
<tr>
<td>Hyder et al., 2009</td>
<td>“…develop and evaluate online heart-healthy recipe videos targeting South Asians...”</td>
<td>South Asians</td>
<td>6-8 minutes</td>
<td>“…participants rated excellent/good for visual appeal (77%), preparation time (77%), and overall quality (74%) for the videos.”</td>
</tr>
<tr>
<td></td>
<td>“…evaluate the efficacy of providing online nutrition information to South Asians.”</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mechling &amp; Gustafson, 2009</td>
<td>“…investigating the effects of static pictures and video technology as prompting strategies for persons with disabilities.”</td>
<td>High school students with “moderate intellectual disabilities”</td>
<td>12 seconds – 25 seconds</td>
<td>“The percentage of cooking related tasks completed independently was greater for each of the six students when using video prompting compared to static picture prompts...”</td>
</tr>
<tr>
<td>Mechling et al., 2013</td>
<td>“… [video promoting] using commercially available videos would be as effective as custom-made videos when students with a diagnosis of autism completed cooking recipes.”</td>
<td>High school students on autism spectrum</td>
<td>12-23 minutes (custom-made videos)</td>
<td>“…participants performed more steps of the recipes independently correct when using the custom-made videos.”</td>
</tr>
<tr>
<td></td>
<td>Using commercial “Look and Cook” purchased materials and custom-made recipe videos from “point-of-view perspective of the model’s arm and/or hand...”</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*Note. Missing fields in table indicate data is unavailable.*
# Table 2

**Demographics of Food Demonstration Video Survey Respondents (n=50)**

<table>
<thead>
<tr>
<th>State Extensions</th>
<th>n (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Arkansas</td>
<td>4 (8)</td>
</tr>
<tr>
<td>Colorado</td>
<td>1 (2)</td>
</tr>
<tr>
<td>Delaware</td>
<td>1 (2)</td>
</tr>
<tr>
<td>Georgia</td>
<td>20 (40)</td>
</tr>
<tr>
<td>Illinois</td>
<td>7 (14)</td>
</tr>
<tr>
<td>Indiana</td>
<td>1 (2)</td>
</tr>
<tr>
<td>Kentucky</td>
<td>1 (2)</td>
</tr>
<tr>
<td>Maine</td>
<td>2 (4)</td>
</tr>
<tr>
<td>Michigan</td>
<td>1 (2)</td>
</tr>
<tr>
<td>New Jersey</td>
<td>1 (2)</td>
</tr>
<tr>
<td>North Carolina</td>
<td>2 (4)</td>
</tr>
<tr>
<td>Ohio</td>
<td>1 (2)</td>
</tr>
<tr>
<td>Oklahoma</td>
<td>3 (6)</td>
</tr>
<tr>
<td>Tennessee</td>
<td>1 (2)</td>
</tr>
<tr>
<td>Texas</td>
<td>1 (2)</td>
</tr>
<tr>
<td>Washington State</td>
<td>2 (4)</td>
</tr>
<tr>
<td>West Virginia</td>
<td>1 (2)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Job Titles (Agent/Educator)</th>
<th>n (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>FACS*</td>
<td>26 (52)</td>
</tr>
<tr>
<td>4-H</td>
<td>7 (14)</td>
</tr>
<tr>
<td>Federal Programs (SNAP-Ed*, EFNEP*)</td>
<td>5 (10)</td>
</tr>
<tr>
<td>4-H and FACS</td>
<td>2 (4)</td>
</tr>
<tr>
<td>4-H, FACS, and Federal Programs</td>
<td>2 (4)</td>
</tr>
<tr>
<td>FACS and Federal Programs</td>
<td>2 (4)</td>
</tr>
<tr>
<td>Other</td>
<td>6 (12)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Service Area</th>
<th>n (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rural</td>
<td>26 (54)</td>
</tr>
<tr>
<td>Urban</td>
<td>9 (18)</td>
</tr>
<tr>
<td>Suburban</td>
<td>8 (16)</td>
</tr>
<tr>
<td>Other</td>
<td>6 (12)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Numbers of Counties Served</th>
<th>n (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1-2</td>
<td>39 (78)</td>
</tr>
<tr>
<td>3-4</td>
<td>8 (16)</td>
</tr>
<tr>
<td>5 or more</td>
<td>3 (6)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Length of Employment (years)</th>
<th>n (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Under 1</td>
<td>1 (2)</td>
</tr>
<tr>
<td>1-2</td>
<td>5 (10)</td>
</tr>
<tr>
<td>2-5</td>
<td>13 (26)</td>
</tr>
<tr>
<td>6-10</td>
<td>14 (28)</td>
</tr>
<tr>
<td>11-20</td>
<td>9 (18)</td>
</tr>
<tr>
<td>More than 20</td>
<td>8 (16)</td>
</tr>
</tbody>
</table>

*FACS = Family and Consumer Sciences

*SNAP-Ed = Supplemental Nutrition Assistance Program Education

*EFNEP = Extended Food and Nutrition Education Program
Long Live Idaho!: Lessons Learned from a Supplemental Nutrition Assistance Program Education Social Marketing Campaign
References


Table 1

*Target Audience Campaign Recognition*

<table>
<thead>
<tr>
<th>Frequency % of respondents&lt;sup&gt;1&lt;/sup&gt;</th>
<th>“Water is just fine, thanks”</th>
<th>“Feed your kids a rainbow”</th>
<th>“Kids grow best in motion”</th>
<th>“Play time, not screen time”</th>
<th>Overall Campaign Average</th>
</tr>
</thead>
<tbody>
<tr>
<td>Recognized the campaign message</td>
<td>42%</td>
<td>37%</td>
<td>40%</td>
<td>40%</td>
<td>40%</td>
</tr>
<tr>
<td>Viewed message on social media</td>
<td>52%</td>
<td>60%</td>
<td>55%</td>
<td>59%</td>
<td>57%</td>
</tr>
<tr>
<td>Viewed message on roadside billboards</td>
<td>17%</td>
<td>25%</td>
<td>14%</td>
<td>14%</td>
<td>18%</td>
</tr>
<tr>
<td>Viewed message on posters&lt;sup&gt;2&lt;/sup&gt;</td>
<td>52%</td>
<td>70%</td>
<td>73%</td>
<td>68%</td>
<td>66%</td>
</tr>
</tbody>
</table>

1. Total sample size = 55; respondents who recognized the campaign message were then asked where they saw the message.
2. Posters were placed in schools, daycare facilities, and health care facilities.
<table>
<thead>
<tr>
<th>Frequency % of respondents</th>
<th>“Water is just fine, thanks”</th>
<th>“Feed your kids a rainbow”</th>
<th>“Kids grow best in motion”</th>
<th>“Play time, not screen time”</th>
<th>Overall Campaign Average</th>
</tr>
</thead>
<tbody>
<tr>
<td>Message improved awareness of healthy eating and active living habits for young children</td>
<td>50%</td>
<td>52%</td>
<td>52%</td>
<td>54%</td>
<td>52%</td>
</tr>
<tr>
<td>Considered the message material informative</td>
<td>49%</td>
<td>42%</td>
<td>51%</td>
<td>47%</td>
<td>47%</td>
</tr>
<tr>
<td>Considered the message material attractive</td>
<td>40%</td>
<td>62%</td>
<td>55%</td>
<td>51%</td>
<td>52%</td>
</tr>
<tr>
<td>Considered the message material engaging</td>
<td>45%</td>
<td>62%</td>
<td>58%</td>
<td>62%</td>
<td>57%</td>
</tr>
<tr>
<td>Considered the message material helpful</td>
<td>35%</td>
<td>29%</td>
<td>27%</td>
<td>36%</td>
<td>32%</td>
</tr>
<tr>
<td>Considered the message material motivating</td>
<td>38%</td>
<td>44%</td>
<td>49%</td>
<td>56%</td>
<td>47%</td>
</tr>
<tr>
<td>Did not consider the message material effective</td>
<td>7%</td>
<td>5%</td>
<td>13%</td>
<td>4%</td>
<td>7%</td>
</tr>
</tbody>
</table>

1. N=55
References


## Lessons Learned

**Extension infrastructure:** Technology resources of the university made online delivery more feasible.

**Co-facilitation:** The co-facilitation model is advantageous in regards to group support, coach support, and technology issues.

**Regular support of educators:** Monthly meetings provided technical assistance to Extension educators.

**Partnership:** Partnerships enhanced various aspects of the program including recruitment efforts, lifestyle coach training, and participants retention.

## Benefits

**New audiences and formats:** Virtual formats made programs available to individuals who might otherwise not be able to attend in-person sessions due to scheduling/work conflicts and transportation limitations.

**Expanded reach:** While most states offer DPP in some, but not all counties, the virtual format of program delivery enhanced statewide reach.

**Added benefits of the program beyond diabetes prevention:** The National DPP provided a form of social support for participants during a time of unprecedented isolation.

**High retention:** up to 100% retention even with the change to virtual formats

## Challenges

**Challenges with internet access:** Many communities still do not have good broadband which hinders virtual program participation.

---

### Table 1

**Lessons Learned, Benefits, and Challenges of CE-NDPP Member States with Diabetes Prevention Lifestyle Management Programs During COVID-19 (N=16)**

<table>
<thead>
<tr>
<th>Lessons learned</th>
<th>Benefits</th>
<th>Challenges</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Extension infrastructure:</strong> Technology resources of the university made online delivery more feasible.</td>
<td><strong>New audiences and formats:</strong> Virtual formats made programs available to individuals who might otherwise not be able to attend in-person sessions due to scheduling/work conflicts and transportation limitations.</td>
<td><strong>Challenges with internet access:</strong> Many communities still do not have good broadband which hinders virtual program participation.</td>
</tr>
<tr>
<td><strong>Co-facilitation:</strong> The co-facilitation model is advantageous in regards to group support, coach support, and technology issues.</td>
<td><strong>Expanded reach:</strong> While most states offer DPP in some, but not all counties, the virtual format of program delivery enhanced statewide reach.</td>
<td></td>
</tr>
<tr>
<td><strong>Regular support of educators:</strong> Monthly meetings provided technical assistance to Extension educators.</td>
<td><strong>Added benefits of the program beyond diabetes prevention:</strong> The National DPP provided a form of social support for participants during a time of unprecedented isolation.</td>
<td></td>
</tr>
<tr>
<td><strong>Partnership:</strong> Partnerships enhanced various aspects of the program including recruitment efforts, lifestyle coach training, and participants retention.</td>
<td><strong>High retention:</strong> up to 100% retention even with the change to virtual formats</td>
<td></td>
</tr>
</tbody>
</table>
### Table 2
**Characteristics of Three Extension System CDC Lifestyle Change Programs**

<table>
<thead>
<tr>
<th>State Extension Service</th>
<th>Year of CDC LCP initiation</th>
<th>CDC recognition status*</th>
<th>Initiation date of distance learning (DL)</th>
<th># of DL cohorts/participants</th>
<th>Program platform/conferencing system</th>
<th>Weekly data collection method</th>
</tr>
</thead>
<tbody>
<tr>
<td>Virginia Cooperative Extension</td>
<td>2016</td>
<td>In-Person Preliminary</td>
<td>July, 2020</td>
<td>5/66</td>
<td>Canvas/Zoom</td>
<td>Qualtrics</td>
</tr>
<tr>
<td>University of Minnesota Extension</td>
<td>2013</td>
<td>In-Person &amp; Distance Learning Full</td>
<td>June, 2020</td>
<td>6/43</td>
<td>None/Zoom</td>
<td>Per participant preference</td>
</tr>
<tr>
<td>University of Idaho Extension</td>
<td>2017</td>
<td>In-Person Pending Distance Full</td>
<td>February, 2020</td>
<td>10/125</td>
<td>None/Zoom</td>
<td>Qualtrics</td>
</tr>
</tbody>
</table>

*CDC recognition status - (pending, preliminary, full) granted for delivery mode (in-person, online, distance learning)*