

2012 Lubbock County Better Living for Texans - Back to Basics

Helping People in Texas Eat Better and Safer

E. Kay Davis, County Extension Agent-Family & Consumer Sciences

Mary Alice Roberts, Better Living for Texans Extension Assistant

Relevance:

In Lubbock County, an estimated 38,886 individuals receive benefits from the Supplemental Nutrition Assistance Program (SNAP), historically known as food stamps. Studies have shown individuals who live in poverty (including SNAP recipients) have dietary intakes that are not in agreement with current recommendations (i.e. Dietary Guidelines or MyPlate). This audience, like many, may not recognize their risk for foodborne illness. Having enough food to eat is also a challenge; an estimated 1 in 6 households in Texas experience food insecurity.

Response:

The BLT Program is a cooperative endeavor among Texas A&M AgriLife Extension Service, Texas Health and Human Services Commission (HHSC), and the Food and Nutrition Services (FNS) of USDA. A component of the Supplemental Nutrition Assistance Program (SNAP), BLT offers food and nutrition education to SNAP recipients, applicants, and other low-income audiences to help improve their ability to plan and prepare nutritious meals, stretch food dollars, and prepare and store food safely. BLT also incorporates the *Walk Across Texas* program to promote physical activity. In Lubbock, clientele have the opportunity to participate in the Healthy Fit Lubbock Walk Across Texas coordinated by Texas Tech University Health Sciences Center.

BLT is delivered through a variety of teaching methods that reflect audience needs. Teaching methods include lessons series, single education events, one to one consultations, demonstrations and tours. With the presence of BLT in almost every county in the state, Extension is poised to reach all areas of Texas and increase the likelihood of meeting the nutrition education needs of under-served Texans. In Lubbock County, the FCS Advisory Board, Lubbock County Partner's for Parenting Coalition, Building Strong Families Conference Board, and Leadership Advisory Board acknowledge the state requirement for BLT programming and confirmed nutrition education and food security and safety as a need in Lubbock County in addition to other issues validating Lubbock County's participation in the Better Living for Texans at the Gold Level with a full-time Extension Assistant and utilizing Texas Tech Dietetic Interns and other volunteer interns from Texas Tech.

During 2012, 91 Lubbock County adults completed the BLT *Back to Basics* series. This program focuses on meal planning, stretching food dollars, and adopting selected behaviors that can reduce the risk of foodborne illness. Of those 91 participants, 47 completed the 30-day follow-up survey which allows us to assess the extent that targeted behaviors were adopted. This report reflects the 91 participants who completed the pre and post survey (which measures intent to change behavior) and the 47 participants who also completed the follow-up survey. Contacts were made in programs at Buckner's A Family Place/My Father's House Christian Women's Job Corps, Lubbock ISD and South Plains Community Action Head Start parenting programs and food service staff, senior citizens centers, The Stork's Nest program for pregnant women, Lubbock ISD and its alternative schools health fairs, the Community Health Center of Lubbock, Hope Community of Shalom homeless programs, Texas Migrant Council, Dept. of Assistive & Rehabilitation Services, Junior League of Lubbock, Methodist Children's Home, Summer Youth Food Service programs, South Plains Area Agency on Aging, United Way, The Burkhardt Center for Autism, Catholic Family Services and others. Collaborations in addition to the previous program locations include Texas Tech University Dietetic Interns, United Supermarkets, Building Strong Families Conference and its participating agencies, The Parenting Cottage, TX Dept. of Health and Human Services, Region 17 Education Service Center.

Senior Citizens Centers and Other Group Programs – are provided by Texas A & M AgriLife Extension Service in Lubbock County to satisfy the USDA and South Plains Association of Governments Area Agency on Aging requirement of a monthly nutrition programs for each senior center. Older persons are at a higher risk for developing diabetes, heart disease, and other chronic illnesses as well as food borne illness. One “In The Know About Nutrition” topic per month was taught at 4 BLT and 2 non-BLT senior centers. The 10 TX Tech Dietetic Interns each wrote at least one of these nutrition presentations during their community nutrition rotation in the Lubbock County Extension Office in 2011-2012. This continues with the interns in the 2012-2013 internship class. The SPAG AAoA senior center bookkeepers and directors also received the sr. center programs (3 per quarter) so that the centers in counties without agents would have an approved nutrition program to present.

Food Safety, Sanitation, Food Preservation – Four Food Protection Management 2-day class was taught with Hale County FCS Agent Deana Sageser in Hale and Lubbock Counties. These are partial cost recovery events and relate to Community Resource Development as it enhances job skills and employability.

Results:

During 2012, 91 Lubbock County adults completed the BLT *Back to Basics* series. This program focuses on meal planning, stretching food dollars, and adopting selected behaviors that can reduce the risk of foodborne illness. Of those 91 participants, 47 completed the 30-day follow-up survey which allows us to assess the extent that targeted behaviors were adopted. This report reflects the 91 participants who completed the pre and post survey (which measures intent to change behavior) and the 47 participants who also completed the follow-up survey. Contacts were made in programs at Buckner’s A Family Place/My Father’s House Christian Women’s Job Corps, Lubbock ISD and South Plains Community Action Head Start parenting programs and food service staff, senior citizens centers, The Stork’s Nest program for pregnant women, Lubbock ISD and it alternative schools health fairs, the Community Health Center of Lubbock, Hope Community of Shalom homeless programs, Texas Migrant Council, Dept. of Assistive & Rehabilitation Services, Junior League of Lubbock, Methodist Children’s Home, Summer Youth Food Service programs, South Plains Area Agency on Aging, United Way, The Burkhardt Center for Autism, Catholic Family Services and others. Collaborations in addition to the previous program locations include Texas Tech University Dietetic Interns, United Supermarkets, Building Strong Families Conference and its participating agencies, The Parenting Cottage, TX Dept. of Health and Human Services, Region 17 Education Service Center.

Participants were primarily female (84%) and from a variety of ethnic backgrounds. More than half of the participants (n=51) had a high school degree or less; nearly 40%, however (n=36) had completed some college or a college degree. Average household size of the participants was 3.3. More than 51% (n=47) of the 91 participants received SNAP (food stamps). Eighteen percent (n=16) reported receiving food from a food bank/pantry within the last 30 days.

Evaluation results – intent to change behavior:

Meal Planning and Food Resource Management: Intent to change behaviors was examined by evaluating the pre and post surveys of the 65 individuals who completed the program series. Upon entry into the BLT program, a majority of the participants reported practicing meal planning, shopping with a list and comparing prices either “always” or “sometimes.” The practice of using unit pricing also was evident but to a lesser extent. Also upon entry into the program, 66 of the 91 individuals (73%) reported running out of food before the end of the month “always” or “sometimes.” At the end of the program, there was an increase in the number of participants who reported intent to practice these behaviors “always.”

Food Safety: At the beginning of the program 75 (82%) of the participants reported “always” sanitizing cutting boards after cutting up raw meat or poultry. Immediately after the program ended, 86 (95%) reported intent to do so. Equally encouraging was the rise in the number of participants who reported that they never intended to thaw food at room temperature (n=21 pre; n=29 post). Little change was noticed with respect to how long prepared foods were left out at room temperature but most were eating or storing their food within the recommended 2-hour period.

Adoption of Behavior:

Meal Planning and Food Resource Management: The adoption of actual behaviors was assessed by analyzing the data from the 47 participants who completed the pre-, post-, and 30-day follow-up surveys. Most participants were using the four targeted food resource management practices either “always” or “sometimes” when they entered the BLT program. Immediately after the program ended there was a noted increase in the percentage of participants who intended to practice the behaviors “always.” Thirty days later, the percentage of participants practicing most of the behaviors either “always” or “sometimes” was higher than when the program began. The most notable change in behavior was that of using unit pricing to identify economic food buys.

Immediately after the program ended, 19 (40%) of the 47 participants reported that they felt they could stretch their food resources to last the entire month “always.” As a group, we did see an overall increase in the number of participants who “never” ran out of food before the end of the month. However, half of the participants continued to experience some challenges in having food for the entire month even after the program ended.

Food Safety: Forty (85%) participants reported sanitizing cutting boards after cutting up raw meat or poultry. More indicated intent to adopt that behavior immediately after the program ended and 44 (94%) continued to do so 30-days later. More people were not thawing food at room temperature compared to when the program began, although nearly 60% indicated that they continue to do so even after the program ended. Most participants were eating or storing prepared foods within the recommended 2-hour period when the program began and continued to do so 30 days after the program ended.

Other findings:

57% (n=52) of the 91 participants identified BLT as their first exposure to AgriLife Extension. This suggests that the program is reaching new audiences who otherwise might not have the opportunity to benefit from Extension programs.

Average monthly out-of-pocket food expenses reported by participants:**

Before BLT: \$ 249.21

After BLT: \$ 223.42

** Based on 38 participants who reported monthly out-of-pocket food expenses at the beginning of BLT and 30-days after the program ended. Changes in out-of-pocket food expenses **were not** significantly different, although the downward trend is encouraging.

For the 47 participants who completed the pre, post, and follow-up surveys, the percentage who rated their perceived ability to prepare nutritious meals as either “good” or “very good” was 66% (n=31) before BLT (pre-survey) and 94% (n=44) after BLT (post survey).

42 participants (89%) rated the BLT program as “excellent.”

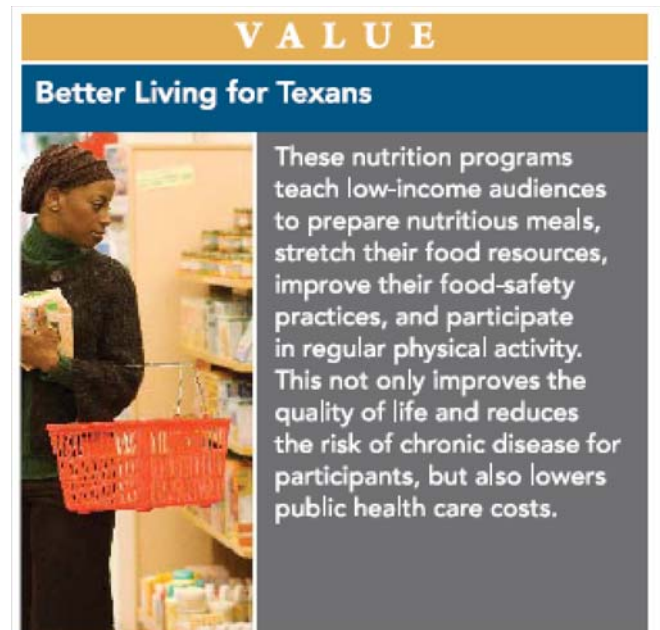
BLT EA, Mary Alice Roberts secured a \$1,200.00 donation from United Supermarkets in July 2010 to be used to buy food as incentives for those completing the 3-lesson series. The series was taught to 6 different groups in 2012 with 47 people completing the series and 28 participants receiving a bag of groceries. A total of \$303.64 was used on food and shopping bags. This averages out to \$10.84 per person. There is \$200 left to spend in 2012-2013.

Senior Citizen Centers and Other Group Nutrition Programs – Four BLT and 2 Non-BLT senior citizen centers received a monthly nutrition program. Topics for 2010 included in the “In The Know About Nutrition” series were: My Plate; Why Cholesterol Matters; Nutritional Keys to a Healthier You; Omega 3 Fats & Your Health; Vitamin D Quick Facts; Make Your Bones Strong For Life; Healthy Eating After 50; Make Better Beverage Choices; Smart Snacking; Food, Drugs, Supplements: They Don’t Always Mix; How to Combat Those Holiday Cravings; Beat The Bulge This Holiday. There were 708 Non-BLT senior center participants, 1428 BLT qualified senior center participants, and 720 receiving home delivered meals from the Slaton Senior Center for a total of 2856 senior citizens receiving these monthly nutrition programs or handouts. Because Senior Center directors and Bookkeepers come to Lubbock for SPAG AAoA quarterly trainings from the surrounding 20 counties of which several have no FCS Agent, a program highlighting the Lubbock County senior center lessons for the quarter is presented. These center directors,

as a result, have 3 nutrition programs to present to their clientele fulfilling the program requirements of USDA and SPAG. This agent is also a member of the SPAG AAoA Advisory Council.

Food Safety, Sanitation, Food Preservation – Four Food Protection Management classes were team taught with Hale County FCS Agent, Deana Sageser in Plainview and Lubbock. Twenty-five total persons took the 2-day class. On the pre-test, 72% knew properly refrigerated left-over foods needed to be reheated to 165 degrees before placing back on the steam table and 92% knew this on the post-test. Only 40% knew that fresh eggs and live shellfish do not need to be accepted at 41 degrees or lower on the pre-test, but 64% knew this on the post-test. Ninety-two percent knew that using a separate cutting board for cooked and raw foods could prevent cross-contamination on the pre-test, and 96% reported the correct answer on the post-test. Ninety-six percent on both pre- and post-tests knew correctly the best way to wash hands. Fifty-two percent on the pre-test knew what a critical control point in food protection management was and 72% knew the correct answer on the post-test. On the pre-test, 92% knew that raw turkey breasts should be discarded if left out for 5 hours and 100% reported the correct answer on the post-test. Seventy-six percent knew that poultry, stuffed meats, and all stuffing should be cooked to a minimum internal temperature of 165 degrees, but only 72% remembered this on the post-test. The number of times that utensils, equipment, and food-contact surfaces that comes in contact with potentially hazardous food must be cleaned & sanitized was correctly answered by 84% on the pre-test, while 100% knew that this must be done after each use or every 4 hours. Eighty percent knew that tableware & equipment must be allowed to air dry after cleaning & sanitizing on the pre-test, and 100% knew this on the post-test. Only 24% knew that Sanitizing is the reduction of microorganisms from a clean surface, while 84% knew so on the post-test. Eighty-four percent on the pre-test knew an employee diagnosed with Shiga Toxin-producing *E. coli* must be excluded from the establishment and 100% were correct on the post-test. The correct temperature of 41 degrees or below for refrigerating potentially hazardous foods was reported by 76% on the pre-test and 96% on the post-test. Forty percent knew that ground beef must be cooked to an internal temperature of 155 degrees on the pre-test while 92% reported this answer on the post-test. On the pre-test, 84% knew that a Hepatitis A virus outbreak would be linked to an infected food handler serving ready-to-eat food, while 88% reported this answer on the post-test. Eighty percent on the pre-test knew that gloves should be worn when handling ready-to-eat foods and 96% reported this on the post-test. Eighty-eight percent on the pre-test knew that unopened packages of crackers were the only items that can be re-served, but 100% reported this on the post-test. Of the 25 persons taking the class and ServSafe exam, 22 passed and received certificates as Certified Food Managers.

Five classes have been set for 2013 to be team taught by Lubbock CEA-FCS, E. Kay Davis and Hale CEA-FCS, Deana Sageser. This class is a partial cost recovery program.



VALUE

Better Living for Texans

These nutrition programs teach low-income audiences to prepare nutritious meals, stretch their food resources, improve their food-safety practices, and participate in regular physical activity. This not only improves the quality of life and reduces the risk of chronic disease for participants, but also lowers public health care costs.