

Food, Health, Hope: An Answer to Diabetes

Evaluation Report Executive Summary

May 2019

Food, Health, Hope: An Answer to Diabetes (FHH Diabetes) is a collaborative initiative among Summit Medical Group Foundation (SMGF), the Community Food Bank of New Jersey (CFBNJ), and 7 northern New Jersey food pantries. Funded by CFBNJ and SMGF, the program identifies food pantry clients who have diabetes or pre-diabetes and provides participants with diabetic-appropriate foods and educational programs while monitoring their blood glucose levels and other health indicators.

This executive summary provides an overview of the evaluation report including program background, evaluation methods, and key findings.

Program Overview

Beginning in 2016, SMGF and CFBNJ collaboratively undertook a process to develop a comprehensive, innovative program to address health and nutrition disparities among NJ residents with diabetes and pre-diabetes served by urban food pantries. FHH Diabetes has been implemented in 7 food pantries located in 5 communities (Irvington, Newark, Orange, Paterson, and Plainfield) across 3 northern NJ counties (Essex, Passaic, and Union). The FHH Diabetes program goal is *to reduce food and health disparities and improve health knowledge, access, and achievement of better glycemic control among food bank clients diagnosed with or at risk for Type II diabetes.*

Food pantry clients in the 7 food pantries with baseline blood glucose (i.e., HbA1c) levels at or greater than 5.7 were eligible for FHH Diabetes. Interested eligible clients completed an enrollment form and consented to participating in 3 intervention services. These services, as planned, included:

- Diabetic-appropriate Food Distribution: Twice monthly, pantries distributed specially-compiled food boxes containing diabetic-appropriate foods, including fresh produce, whole grains, and lean protein.
- Education Classes: Monthly, lifestyle and nutrition education classes were offered on-site at each of the participating food pantry sites.
- Medical Screenings: On a quarterly basis (i.e., every 3 months), SMGF staff and volunteers conducted screenings for participants of HbA1c, hypertension, and obesity (i.e., height and weight to calculate body mass index or BMI).¹ Podiatry and vision screenings were offered at least once at each of the 7 food pantry sites.

¹ Only those SMGF staff and volunteers who were nurses, physicians, or other trained medical personnel conducted these screenings.

Evaluation Methodology

The Center for Research and Evaluation on Education and Human Services (CREEHS) at Montclair State University was retained by SMGF to conduct an evaluation of FHH Diabetes from 2017 to 2019. The aim of this evaluation was to assess the process of implementing FHH Diabetes as well as examine changes in program participants' knowledge, attitudes, behaviors, and medical outcomes. A mixed-methods, non-experimental design was used. CREEHS collected primary and secondary data from a variety of FHH Diabetes stakeholders, including program participants, FHH Diabetes staff, program leadership, and the managers of the food pantries serving as program sites. Data collection activities included: participant pre and post-surveys, participant satisfaction survey, participant focus groups, FHH Diabetes staff and program leadership interviews; pantry manager focus groups; and, program data. Qualitative data were content analyzed for common themes. Quantitative data were analyzed using descriptive statistics as well as tests of significance as appropriate (e.g., paired t-test and Wilcoxon Signed-Rank test).

Key Findings

The evaluation identified several accomplishments in key areas. These findings are highlighted below.

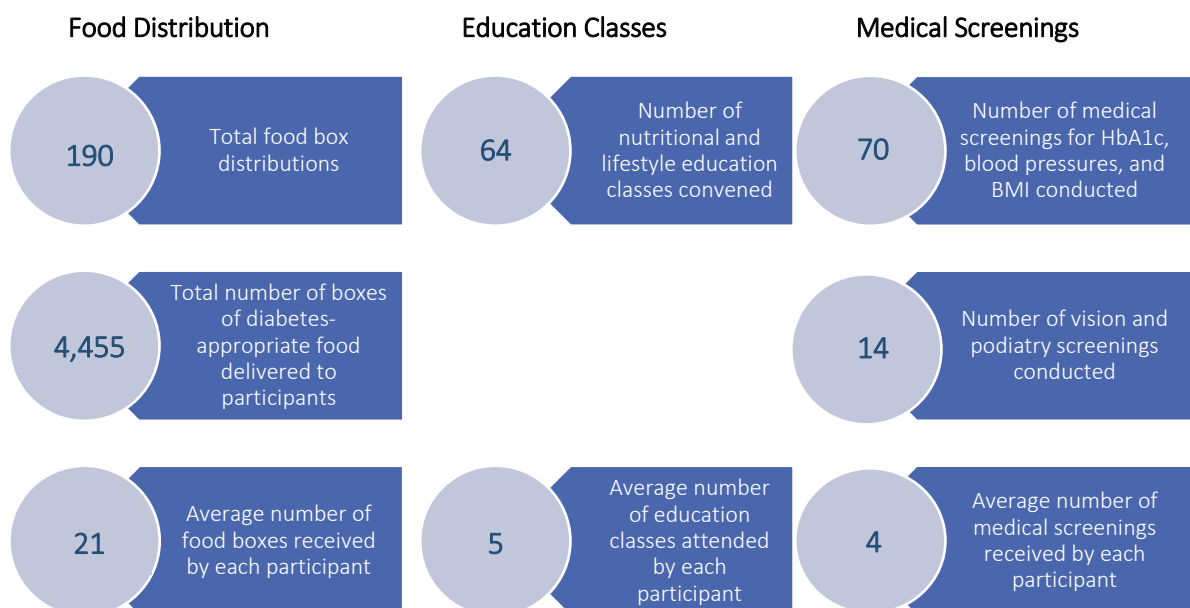
Participant Enrollment

The program enrolled 269 of 300 planned clients (90% of enrollment target) and retained 202 participants (75% retention rate) in the study.

Program Implementation

The program implemented all 3 components (food distribution, education classes, and screenings) in each of the 7 participating food pantry sites (Figure 1).

Figure 1. FHH Diabetes Implementation by the Numbers, Overall



Intersectoral Partnership

The partnership worked well together to support the implementation of FHH Diabetes through planning, collaboration, fundraising, marketing, and resource sharing. Through their shared vision and each partner's set of skills, knowledge, and resources, the partnership was able to implement the program and adapt the model as needed.

Pantry Outcomes

Pantry managers reported increased awareness about diabetes and related health issues among staff and volunteers. Pantry staff are interested in offering healthier food options to their clients.

Increased Availability of Healthy Foods

Distribution of 4,455 healthy diabetes-appropriate food boxes at 7 pantries helped increase the availability of healthy foods to program participants. The average number of weeks participants had diabetes-appropriate food available increased from an average of 2 weeks per month before the program to 3 weeks per month in the program.

Participant Satisfaction with FHH Diabetes

The majority of participants reported feeling welcomed in the program and would recommend the program to family and friends. They also reported that the program helped change the way they take care of themselves (Figure 2).

Participant Behavior Changes

Three-quarters of participants reported making better food choices (75%) and sharing results of the screenings with their doctor (72%). Further, two-thirds of participants (66%) reported eating more fruits and vegetables during weeks when they received their FHH provided food box (Figure 3).

Improvements in Medical Outcomes

Several improvements were demonstrated in key health indicators that were tracked by the program from pre- (baseline) to post-intervention, including:

- HbA1c levels statistically significantly improved;
- Blood pressure statistically significantly improved;
- 74% of participants improved values on 1 or more measured health indicator (HbA1c, BMI, blood pressure) from baseline to post-intervention;

Figure 2. Satisfaction with FHH Diabetes (% "strongly agree" or "agree")

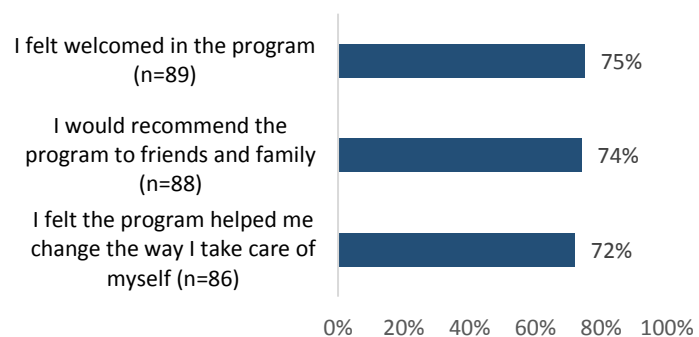
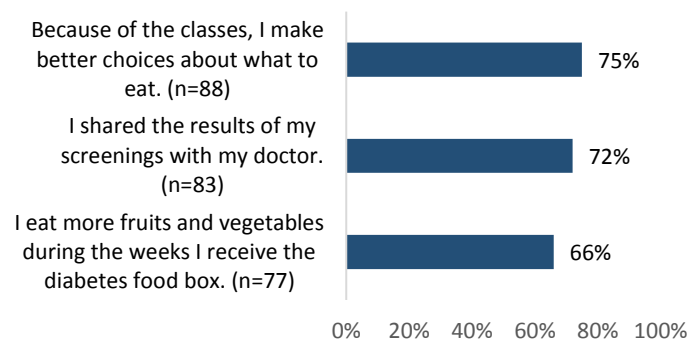


Figure 3. Health Behaviors after FHH Diabetes (% "strongly agree" or "agree")



- Half of all participants (50%) improved HbA1c values from pre- to post-intervention, and 10% moved from an HbA1c categorical level in the pre-diabetic or diabetic range to an HbA1c in the normal range; and,
- One-third of participants (32%) improved in Blood Pressure categorical level.

