A Statewide Survey of SNAP Participants: Barriers to Achieving a Healthy Diet

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METHODS

Survey Procedures: Potential participants were contacted by surface mail. The letter of invitation included instructions to complete the survey online. Non-respondents were contacted by phone two weeks later to complete the survey. All study materials, including the online and telephone versions of the survey, were available in Spanish. An $10 e-gift card was provided to each participant.

Survey Instrument: The survey instrument included 40 ended questions organized into seven different parts. Several additional open-ended questions were used to obtain details or explanations.

Data Analysis: Each participant was assigned a weight to ensure that estimates reflected key characteristics of Nevada's SNAP population. Descriptive and inferential statistics were computed using SAS; α < .05.

RESULTS

The final sample (n=1,014) included 590 participants (58%) who received SNAP benefits during September, 2018. Survey participants were contacted between December 2018 to March, 2019.

Sample: A stratified random sample of adults (n=3,959) who received SNAP benefits during September, 2018 were selected to represent the two most populated counties in Nevada (Clark and Washoe Counties) and all other counties combined.

Survey Procedures

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Design: A descriptive, cross-sectional survey was conducted from December 2018 to March, 2019.

Participants' relative agreement with statements about perceived barriers to achieving a healthy diet are shown in Table 2. The total number of perceived barriers was computed for each participant. Analyses revealed that having less than a high school education, living alone, and reporting a physical, mental or emotional disability was predictive (p < .05) of a greater number of barriers (not shown).

Participants regarding nutrition, food security and physical activity needs of Nevada's SNAP participants - Interviews with key informants with knowledge of audiences and their communities.

To examine relevant community characteristics and other environmental factors that shape nutrition and physical activity behaviors for the purpose of identifying opportunities for policy, systems and environmental approaches.

The assessment was conducted in three phases using complementary approaches that resulted in both quantitative and qualitative data.

Phase I: An examination of existing data to characterize SNAP-Ed audiences and low-income communities.

Phase II: Interviews with key informants with knowledge of the SNAP-Ed audiences and their communities.

Phase III: A statewide survey of Nevada’s SNAP households regarding opinions and experiences.

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OBJECTIVE

The objective of third and final phase of the needs assessment was to measure the opinions of SNAP participants regarding nutrition, food security and physical activity needs; barriers to making behavior changes; and preferences for information and assistance.

The details provided herein are limited to one survey component, barriers to achieving a healthy diet.

METHODS

Design: A descriptive, cross-sectional survey was conducted from December 2018 to March, 2019.

Sample: A stratified random sample of adults (n=3,959) who received SNAP benefits during September, 2018 were selected to represent the two most populated counties in Nevada (Clark and Washoe Counties) and all other counties combined.

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Data Analysis: Each participant was assigned a weight to ensure that estimates reflected key characteristics of Nevada's SNAP population. Descriptive and inferential statistics were computed using SAS; α < .05.

RESULTS

The final sample (n=1,014) included 590 participants (58%) who received SNAP benefits during September, 2018. Most completed the English version (93%). The survey instrument included 40 ended questions organized into seven different parts. Several additional open-ended questions were used to obtain details or explanations.

Participants' relative agreement with statements about perceived barriers to achieving a healthy diet are shown in Table 2. The total number of perceived barriers was computed for each participant. Analyses revealed that having less than a high school education, living alone, and reporting a physical, mental or emotional disability was predictive (p < .05) of a greater number of barriers (not shown).

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REFERENCES


ACKNOWLEDGEMENTS

This study was funded by USDA's Supplemental Nutrition Assistance Program. The authors thank the Nevada Division of Welfare and Supportive Services, members of the steering committee, key informants, and the SNAP participants who completed the survey.