

2020

Perceptions of Fruits and Vegetables amongst Supplemental Nutrition Assistance Program Recipients

Latasha Shanelle Reddick
Walden University

Follow this and additional works at: <https://scholarworks.waldenu.edu/dissertations>



Part of the [Public Health Education and Promotion Commons](#)

This Dissertation is brought to you for free and open access by the Walden Dissertations and Doctoral Studies Collection at ScholarWorks. It has been accepted for inclusion in Walden Dissertations and Doctoral Studies by an authorized administrator of ScholarWorks. For more information, please contact ScholarWorks@waldenu.edu.

Walden University

College of Health Sciences

This is to certify that the doctoral dissertation by

Latasha Shanelle Reddick

has been found to be complete and satisfactory in all respects,
and that any and all revisions required by
the review committee have been made.

Review Committee

Dr. Joseph Robare, Committee Chairperson, Health Services Faculty

Dr. Larissa Estes, Committee Member, Health Services Faculty

Dr. Michael Brunet, University Reviewer, Health Services Faculty

Chief Academic Officer and Provost

Sue Subocz, Ph.D.

Walden University

2020

Abstract

Perceptions of Fruits and Vegetables amongst Supplemental Nutrition Assistance
Program Recipients

by

Latasha Shanelle Reddick

MSM, Troy University, 2009

BS, Albany State University, 2007

Dissertation Submitted in Partial Fulfillment

of the Requirements for the Degree of

Doctor of Philosophy

Health Services: Community Health Education & Advocacy

Walden University

August 2020

Abstract

Supplemental Nutrition Assistance Program (SNAP) benefits are the primary source of food for Georgians with an annual income under the federal poverty level. This program provides monthly monetary benefits to allow the purchase of food through an Electronic Benefits Transfer (EBT) card. Georgia SNAP beneficiaries do not receive nutrition counseling or have purchasing restrictions associated with their benefits. Previous research has indicated that there is a significant benefit to eating fruits and vegetables. The purpose of this qualitative study was to apply the health belief model theory to understand the viewpoint of Georgia SNAP beneficiaries regarding fruits and vegetables. Data were collected through SNAP participant interviews and were audio-recorded, transcribed, and coded manually and with NVivo statistical software. The results demonstrated that the ongoing nutrition education is helpful, beneficial, and positive. The participants also stated that the paper copy of nutrition education is most preferred. Participants viewed fruits and vegetables as healthy food choices and the local SNAP office did an excellent job of providing nutrition education. Another reoccurring theme was that long periods of excessive meat consumption can be harmful. SNAP recipients will benefit from local community events, a collaborative learning approach, and culturally competent nutrition education webinars. These implications will increase positive social change because it enhances nutrition education knowledge.

Perceptions of Fruits and Vegetables amongst Supplemental Nutrition Assistance

Program Recipients

by

Latasha Shanelle Reddick

MSM, Troy University, 2009

BS, Albany State University, 2007

Dissertation Submitted in Partial Fulfillment

Of the Requirements for the Degree of

Doctor of Philosophy

Health Services: Community Health Education & Advocacy

Walden University

August 2020

Table of Contents

Chapter 1: Introduction to the Study.....	1
Introduction.....	1
Background.....	2
Purpose of the Study.....	2
Problem Statement.....	5
Research Questions.....	6
Theoretical Framework.....	6
Nature of the Study.....	7
Definitions.....	7
Assumptions, Limitations, Scope, and Delimitations.....	8
Significance.....	9
Summary.....	9
Chapter 2: Literature Review.....	11
Introduction.....	11
Literature Search Strategy.....	11
USDA FNS Reports.....	11
Perceptions of a Healthy Diet.....	14
Food Deserts.....	16
The Role that Fruits and Vegetable Play in Eating Healthy.....	16
History of SNAP.....	18

Roles Fruits and Vegetables Play in a Healthy Diet for SNAP Recipients	21
Improving Health	22
Promoting a Healthy Diet	23
Nutrition Food Policy	24
WIC Program History	27
Practices in Nutrition Education for Low-Income Audiences	29
Government Nutrition Programs	31
Summary and Conclusion	31
Chapter 3: Research Methods	34
Introduction	34
Research Design and Rationale	34
Role of the Researcher	35
Methodology	35
Participant Section Logic	37
Instrumentation	37
Procedures for Recruitment, Participation, and Collection	38
Data Analysis Plan	39
Issues of Trustworthiness	39
Summary	40
Chapter 4: Results	42
Introduction	42

Pilot Study.....	43
Research Setting.....	43
Data Collection	45
Data Analysis	46
Evidence of Trustworthiness.....	49
Summary	50
Chapter 5: Discussion, Recommendations, and Conclusion	52
Introduction.....	52
Interpretation of the Key Findings	52
Limitations of the Study.....	55
Recommendations and Implications	57
Positive Social Change	62
Conclusion	62
References.....	63
Appendix A: Letter to Albany Beauty Academy, LLC Requesting Permission.....	83
Appendix B: Letter of Cooperation from Albany Beauty Academy, LLC.....	84
Appendix C: Invitation to participate in research Advertisement	85
Appendix D: SNAP Prescreening Questionnaire	87
Appendix E: Interview Protocol	88
Appendix F: Confidentiality Agreement from TranscribeMe, Inc	97

Appendix G: Summary Handout	99
Appendix I: Memorandum to Director	100

List of Tables

Table 1. Demographics41

List of Figures

Figure 1. Brief history of food stamps	19
Figure 2. Women infants and children's (WIC) history	27

Chapter 1: Introduction to the Study

Introduction

According to the Centers for Disease Control and Prevention (CDC, 2019), fruits and vegetables play a significant role in preventing chronic diseases such as certain cancers, stroke, cardiovascular disease, type 2 diabetes, and excessive body weight gain . The goal of the Supplemental Nutrition Assistance Program (SNAP) is to provide nutrition assistance to income-eligible families and individuals. The SNAP Program is funded by the United States Department of Agriculture (USDA) and administered by the State Department of Human Services. The objective of the program is to help households with limited income and resources to obtain nutritious foods. Currently, SNAP does not have any policies specifying the type of foods that can be purchased using SNAP benefits, which is a federal decision. There are not any state SNAP programs in the United States that specify which foods cannot be bought. Also, the SNAP program does not require or provide nutrition education to clients. The Georgia SNAP website offers a link to the Food Talk website. This online database offers free nutrition education resources, classes, recipes, videos, a blog, and cost-effective money-saving tips for shopping for groceries on a budget. While the Food Talk website serves as an available resource for SNAP clients, viewing it is not mandatory.

Background

There is no evidence in terms of policy regarding the provision of mandatory nutrition education counseling to SNAP recipients in the state of Georgia or across the United States (U.S.). The Georgia Department of Family and Children Services (DFCS) disseminates a brochure to all families and individuals who apply for SNAP. The brochure provides beneficiaries with information regarding healthy food choices and refers recipients to visit the MyPyramid website for more information about eating healthy. The MyPyramid website is a nutrition education website. The brochure encourages recipients to ask designated SNAP workers for more information about eating and shopping for healthy food. There are no supportive policies or practices at Georgia DFCS local offices to provide SNAP recipients information about eating and shopping for healthy food.

Purpose of the Study

The purpose of the study is to assess perceptions of the importance of fruits and vegetables among SNAP recipients. The SNAP program is administered with minimal program staff and client interaction. Individuals and families apply for SNAP benefits by submitting paper applications via fax, mail, or walk-in. A required telephone interview with an Economic Support Specialist is completed with the applicant, and upon approval, an Electronic Benefits Transfer (EBT) card is issued and mailed to the client. SNAP's

program staff make no further contact with clients unless there is a change in household size, income, or renewal recertification.

Georgia SNAP recipients are eligible to renew their SNAP benefits in six-month intervals. It is a federal requirement that the elderly (ages 60 or older) and disabled SNAP clients are eligible to renew for 12-month intervals. The recertification process includes the completion of a paper or web-based renewal form. It allows the client to report changes in income, household size, or address that have occurred since the last renewal period. The client can begin verification of eligibility status no earlier than the 20th day of the month before the month that the recertification starts and no later than the 30th or 31st day of the month that it is due. For a SNAP client to complete the Georgia recertification process, the renewal form must be completed and submitted via the Human Services website.

Once a SNAP employee receives the renewal form, recertification will occur within 30 days after the submission date. The SNAP client will receive a letter verifying the current status of benefits and the new benefit amount, which may increase or decrease based on income and household size. Thirty days before the next renewal, the client will receive a letter via mail as a reminder to complete and submit a SNAP renewal form within the 30-day timeframe. According to the Online Directives Information System (ODIS) Manual, there are no required nutrition education requirements to receive or

maintain SNAP benefits in Georgia. The Georgia DFCS offers free online nutrition resources that encourage eating more fruits and vegetables from the Food Talk website.

The policies restrict SNAP clients from purchasing certain foods (Barnhill & King, 2013). There are several barriers related to fruit and vegetable intake among low-income families. The gross income of SNAP recipients is below the federal poverty level, and transportation plays a role in access to healthy foods when SNAP clients do not have the means to secure transportation to travel to a grocery store to purchase fruits and vegetables. When access to healthy, nutritious, and affordable foods is limited, SNAP recipients have fewer options and are forced to buy unhealthy foods. For example, when a SNAP client does not have access to transportation, the local gas station or convenience store is the only option for grocery shopping. The provision of nutrition education programs via the Internet for SNAP recipients in Pennsylvania was found to be a cost-effective method of providing health education to SNAP recipients (Lohse & Rambolt, 2013). SNAP policies are determined at the federal level by the Food Nutrition Service (FNS) and USDA in response to the needs and demands of states implementing the program. For example, in December 2015, the FNS approved a standard medical deduction of \$185 for senior citizens (ages 60 or older) who were SNAP recipients residing in Georgia. The conventional medical deduction is something that senior citizen SNAP recipients are given towards their income to receive a more substantial SNAP benefit amount. This change was implemented to increase the number of SNAP benefits

that approved Georgia senior citizens receive monthly. SNAP vendors have to meet a minimum food stocking requirement. For instance, a SNAP vendor must offer a minimum of three varieties of meat, bread, vegetables, fruit, or dairy products daily to be considered an authorized vendor (FNS, 2017).

Problem Statement

The problem is that the SNAP program does not provide its clients with nutrition counseling (“Food Stamps,” 2015). Unlike the SNAP program, the Women, Infants, and Children (WIC) program provides nutrition counseling as a mandatory requirement for all recipients. WIC serves as an informative model in terms of how nutrition education is constructive for low-income households. Nutrition education that is provided through WIC can enhance awareness regarding the importance of a healthy diet that incorporates daily intake of fruits and vegetables (Cates et al., 2016).

Nutrition education can alleviate or mitigate the impact of specific conditions or diseases (Davy, Zoellner, Waters, Bailey, & Hill, 2015). Davy, Zoellner, Waters, Bailey, and Hill (2015) said more sugar-sweetened beverages were consumed by SNAP and WIC clients who were diabetic or hypertensive. No added sugar or natural sugar beverage recommendations are only necessary for at-risk groups who have a chronic disease such as diabetes (Davy et al., 2015).

Research Questions

RQ1: What are the perceptions amongst Georgia SNAP recipients regarding healthy eating and the importance of daily intake of fruits and vegetables?

RQ2: What are Georgia SNAP recipients' perceptions of nutrition education?

Theoretical Framework

To understand SNAP recipients' behaviors, the health belief model (HBM) was the theoretical foundation for this study. The HBM is used in health behavior research settings to address actions that cause health issues. Health-related behavior is driven by a person's perception of the benefits and barriers related to health-related diseases. The HBM is also a prevalent theory amongst health education and promotion research. The HBM was used to identify perceived susceptibility, perceived severity, perceived benefits, perceived barriers, cue to action, and self-efficacy. Developing illness and also the severity of the disease plays a vital role in the choices a person makes about food selections.

The HBM also helped to identify SNAP recipients' knowledge, attitudes, and practices related to daily fruit and vegetable intake. The HBM was applied to the study as a theoretical framework for understanding the rationale that SNAP recipients would eat more fruits and vegetables daily if they felt that these foods would lower chronic diseases. It was assumed that SNAP recipients would eat more fruits and vegetables if it

resulted in positive outcomes for their health. The HBM also supported the notion that one must have the confidence to choose fruits and vegetables that are healthy.

Nature of the Study

This study involved a qualitative approach. The qualitative approach was appropriate for this study because it aided in gathering an in-depth understanding of Georgia's SNAP recipients' perceptions, including knowledge, attitudes, and beliefs regarding healthy eating habits. The approach also allowed the researcher to identify common themes from interviews with Georgia SNAP recipients. Thematic content analysis was used during the data analysis to reveal any recurring patterns that were uncovered during the interviews. The basic qualitative research methodology was applied to this study. In-depth open-ended interviews with participants were conducted involving their experiences. Secondly, context and experiences that affected participants' food choices were addressed. The researcher put all preconceived notions aside to understand experiences as they appeared to participants. The basic qualitative research methodology assisted the researcher in assessing the perceptions of the importance of fruits and vegetables amongst SNAP recipients.

Definitions

Health Promotion: Improving the health of communities and individuals through education and lifestyle changes (Liu, 2013).

Food Policy: Regulations that are mandated by a governmental body that determines what is purchased and the types of foods that are offered (Barnhill & King, 2013).

Phenomenology: Type of study design which involves describing meaning of their lived experiences of a concept or a phenomenon (Creswell & Poth, 2018).

Woman, infants, and children (WIC): Federal grant program that provides states with funds to offer low-income women who are pregnant, breastfeeding, or not-breastfeeding postpartum as well as children under age 5 with supplemental foods, nutrition education, and healthcare referrals (About WIC, 2014).

Supplemental Nutrition Assistance Program (SNAP): A federally funded program that offers monthly nutrition assistance to low-income families and individuals (Nutrition Assistance, 2014).

Assumptions, Limitations, Scope, and Delimitations

There is an assumption that SNAP recipients in Georgia are aware of the appropriate daily intake of fruits and vegetables that is recommended by the USDA. DFCS offices do not provide nutrition information to SNAP recipients outside of the Food Talk paper brochures that are located in the lobby of the offices. SNAP workers in Georgia do not have access to nutrition education resources.

Significance

This study will be meaningful to SNAP recipients who are willing to learn more about the benefits of eating more fruits and vegetables daily. The federal FNS department will also find the information in this study beneficial to lead to overall positive social change for Georgia's SNAP recipients. Educating individuals about chronic diseases associated with unhealthy eating habits will motivate SNAP recipients to change their eating behaviors. There are many chronic diseases such as type 2 diabetes, stroke, high blood pressure, and heart disease that could be lessened or prevented with a suitable diet (Boeing et al., 2012). A SNAP policy guiding food purchases could drive healthier food choices amongst SNAP recipients in Georgia. Social change can be created within a community when local, state, and federal endeavors are synchronized effectively to meet common goals, such as promoting nutrition education. A SNAP policy has the potential to lower healthcare costs for the state of Georgia if there are improvements in the prevention of chronic diseases.

Summary

Nutrition education can benefit all adults who receive SNAP benefits in Georgia. SNAP recipients who reside in Georgia should have the opportunity to attend healthy-eating cooking classes and online nutrition courses. SNAP recipients should be informed about the healthy options that are available when utilizing SNAP benefits. Nutrition education may broaden the SNAP recipients' knowledge base, increase comprehension,

and impact their ability to make healthier dietary choices regarding daily fruit and vegetable intake.

Chapter 2: Literature Review

Introduction

The literature review is composed of current information related to the perceptions of the importance of fruits and vegetables amongst the SNAP recipients in Georgia. To narrow down the search, the following key terms were used: *food stamps, SNAP, fruits and vegetable intake, dietary guidelines, food group diversity, balanced diet, optimal nutrition, nutrient-rich foods, healthy diet, WIC program, and food and nutrition education*. A general search was conducted to review information about individuals with income below the federal poverty level, which made them eligible for SNAP benefits. The literature search was narrowed down further by focusing on nutrition education and SNAP recipients.

Literature Search Strategy

I used the following health science databases to compose the literature review: ProQuest, MEDLINE, Health & Medical Complete, PubMed, CINAHL & MEDLINE Simultaneous Search, and Science Direct. The CDC, Food Research & Action Center, Center for Budget Policy Priorities, USDA, FNS and Fruits and Vegetables More Matters web sites were also used to gather necessary background information.

USDA FNS Reports

2012 Reports. The USDA FNS reports provide the latest and most paramount information about the SNAP and WIC benefits. The 2012 SNAP Education and

Evaluation Study (Wave I) report were about intervention nutrition programs for preschoolers, elementary children, and low-income women (Gabor et al., 2012). The 2012 study concluded that the participants made an increase in fruits and vegetable intake after completing the program (Gabor et al., 2012). The Office of Research and Analysis released an article on January 2012 that suggested that WIC improved its participants' diets by presenting information on the importance of consuming fewer added sugars and a greater variety of foods in one's diet (Colman, Nichols-Barrer, Redline, Devancey, & Ansell, 2012). Data from the National Health and Nutrition Examination Survey 2012 suggested that there was room for improvement for healthier eating habits for SNAP recipients as the result of a cluster analysis. Colman et al. (2012) found that increasing the amount SNAP benefits that a family or individual can spend did not make a drastic improvement in the overall quality of diet because it was reported that only 3% percent of participants made diet changes.

2013 reports. The Healthy Incentives Pilot (HIP) was implemented in Hampden County, Massachusetts. The HIP incentive program gave SNAP recipients 30 cents for each dollar spent on fruit and vegetables that did not contain added sugar, salt, fats, or oils (Barlett et al., 2013). Those were the same approved fruits and vegetables associated with WIC vouchers. The 30 cent incentive was added to SNAP recipients' EBT cards and could be used towards any SNAP-eligible food or beverage purchase. During early implementation, HIP faced challenges due to the delay in supermarkets upgrading their

cash register system to accommodate HIP, which took 15 to 24 months in some cases (Barlett et al., 2013).

2014 Report. The Nutrition Assistance in Farmers Markets (FM): Understanding the Shopping Patterns of SNAP Participants (2014) report concluded that 60% of shoppers at the FM ate more vegetables because of the FM incentive (Karakus, Milfort, MacAllum, & Hao, 2014). However, 2.8% of the non-shoppers were aware of the FM SNAP incentives. Sixty-five percent of FM shoppers stated that FM fruits and vegetables were fresher compared to grocery stores (Karakus et al., 2014). The top reason disclosed for not shopping at FM was inconvenient operation hours and the convenience of shopping for all groceries at one location (Karakus et al., 2014).

2015 Reports. The Review of WIC Food Packages: An Evaluation of White Potatoes in the Cash Value Voucher: Letter Report stated that the nutrient profile of white potatoes is similar to other starchy vegetables (Rasmussen, Latuiklippe, & Yaktine, 2015). Hence, it does not benefit the WIC recipients to exclude white potatoes. However, WIC recipients' fruit and vegetable intake needed improvement based on the report findings as well. WIC Food Package Policy Options II stated that the numbers of WIC agencies offering frozen, dried, and canned fruits and vegetables increased by nine percent (Rasmussen et al., 2015).

2016 reports. WIC offers group education sessions, one-on-one counseling sessions, and web-based technology nutrition education. Eighty-three percent of

feedback from WIC recipients was collected using paper surveys during WIC office visits to gain feedback from recipients. The remaining 17% of feedback was received by phone, mail, or online surveys. WIC options have changed with the allowance of soy milk and tofu. Also, adding canned salmon, mackerel, and sardines to WIC vouchers was a necessary change. The total grains sections were expanded as well to include whole wheat tortillas, brown rice, and oatmeal as a substitute for white bread. Furthermore, canned beans can be an alternative for dried beans, and fruits can be fresh, frozen, or canned (Rasmussen et al., 2016). When SNAP recipients were compared to non-SNAP recipients, fruits were ranked as eight, and non-SNAP purchases fruits were classified in four out of 30 categories. Vegetables ranked third amongst SNAP purchases and second with non-SNAP shoppers (Garasky, Mbwana, Romualdo, Tenagiol, & Roy, 2016). Hence, SNAP recipients purchased fewer fruits and vegetables overall compared to non-SNAP recipients (Garasky et al., 2016).

Perceptions of a Healthy Diet

According to the CDC (2015), a healthy diet is composed of whole grains, lean meats, fruits, and vegetables. Perceptions of eating fit can vary in terms of age group, sex, culture, and socioeconomic status (Weinstein, Galindo, Fried, Rucker, & Davis, 2013). One's age, gender, beliefs, and finances may play a significant role in decisions regarding food intake. SNAP recipients did not view eating healthy as an option because of costs associated with eating fruits and vegetables daily (Walsh & Kiviniemi, 2014).

Processed foods are more likely to be purchased by SNAP recipients compared to fresh fruits and vegetables because nonperishable items have a longer shelf life. Fresh fruits and vegetables spoil relatively quickly; therefore, they are not a primary choice for SNAP recipients. Fresh fruits and vegetables also are not accessible, affordable, or plentiful in specific neighborhoods and demographics where SNAP recipients reside (Piontak & Schulman, 2014). Food FM in all 51 states in the USA accept SNAP benefits as payment. Georgia's FMs also offers double incentive dollars for fruits and vegetables that are purchased using SNAP benefits (Wahowiak, 2015). Due to lack of transportation, a SNAP recipient may still not have access to a FM and is forced to shop at the local grocery. Georgia's SNAP workers are not required to inform SNAP recipients about the cost-effective options FMs have to offer.

On the other hand, canned and frozen fruits and vegetables are convenient, cost-efficient, have extended expiration dates; there are no significant differences in nutrition content. Fruits that are served in their juices or water are healthier in comparison to fruits in heavy or light syrup. Fruits in heavy or light syrup have high sugar and calories, which can lead to weight gain in excessive amounts and cause heart disease (Singh, 2013). Consequently, weight gain can lead to hypertension and type 2 diabetes (Zachary, Palmer, Beckham & Surkan, 2013). Nevertheless, type 1 diabetes and genetic hypertension are not preventable; it is imperative to maintain a healthy diet to lessen the symptoms (Sundberg, Augustsson, Forsander, Cederholm, & Axelsen, 2014). The USDA

states that adult men and women should consume between 2-3 cups of vegetables and 1½- 2 cups of fruits per day based on dietary guidelines (Food and Nutrition Services United States Department of Agriculture, 2015).

Food Deserts

In food deserts, SNAP recipients do not have nearby local grocery stores or farmer's markets in their communities. Food deserts have an abundance of local neighborhood quickie marts that offer mainly processed, fat-laden, and sugary foods that are considered factors that are contributing to the nation's obesity epidemic. According to the Economic Research Service in 2015, 12.7% of households in America were without access to healthy foods or food insecure (Economic Research Service, 2017).

Additionally, the proportion of households that are food insecure has decreased. In 2014, the percentage was 14%, and in 2015, it was 12.7% (Household Food Security in the United States 2015, 2017). The ERS 2015 report revealed that 59% of food-insecure households received one or more of the three most extensive federal food assistance programs, such as SNAP, National School Lunch Program, and WIC. However, even with these benefits, food-insecure still lacks money and resources.

The Role that Fruits and Vegetable Play in Eating Healthy

Food choices impact one's overall health. Hence, fruits and vegetables play an important role in eating healthy as a result of their nutrition (Black & Billette, 2013). Fruits and vegetables are composed of the necessary vitamins and minerals needed to

maintain optimal health. Fruits and vegetables give the human body the fuel it needs to eliminate and prevent chronic diseases (Juby & Meyer, 2011). Fruits and vegetables are low in calories, do not contain artificial sugar, and provide some carbohydrates when prepared healthily. A balanced diet that includes lean protein, whole grains, and legumes are also considered healthy options. Cooking healthy consists of limiting added sugar, cholesterol, sodium, and unnecessary fatty oils (Weatherspoon, Oehmke, Dembele & Weatherspoon, 2014). Eating a diet that is comprised of the daily fruits and vegetables cooked healthily can lower blood pressure, eliminate type 2 diabetes, prevent obesity, inhibit heart disease, and certain cancers (Juby & Meyer, 2011). According to the Choose My Plate website, one cup of the fruit group is considered one cup of fruit or 100% fruit juice or half of cup of dried fruit. One cup of the vegetable group is one cup of raw or cooked vegetables or juice, or two cups of uncooked leafy greens (“Choose My Plate,” 2017). Men and women ages 20-30 are recommended to eat two cups of fruit per day

Theoretical Framework

. The qualitative methodology will be used rather than quantitative because the data for this study will be descriptive to reveal the understanding of the SNAP recipient's behaviors. The HBM is a psychological theory that is used in the health science field. The HBM was created to clarify, predict, and explain preventive health behaviors. A SNAP recipient's motivation to consume more fruits and vegetables can be divided into three classifications: individual perceptions, modifying behaviors, and the likelihood of action (DiClemente, Delahanty, Havas & Van Orden, 2015).

Furthermore, the HBM emphasizes the association of health behaviors, practices, and the use of health services. This particular theory will illustrate the perceptions that SNAP recipients have towards fruits and vegetables. One limitation of the HBM is that it does not take into account the emotional factors of health behaviors because the HBM is cognitively constructed (Weinstein et al., 2013). Besides, cultural influences and previous dealings are also not taken into consideration when it comes to the HBM. Cost, expiration dates, access, and lack of proper cooking knowledge were recurrent themes found within the literature regarding fruits and vegetable perceptions amongst SNAP recipients (Walker et al., 2011).

History of SNAP

SNAP was initially called the Food Stamps Program (FSP), and it came in the form of paper vouchers. The first administrator of the FSP was Milo Perkins in 1939,

and Mabel McFiggan was the first person to make a food stamps purchase. McFiggan was an unemployed factory worker in Rochester, New York. In 1961, the FSP pilot program was an Executive Order signed by President Kennedy. The FSP became permanent in 1964 during President Johnson's administration (A short History of SNAP).

SNAP is a federally funded entitlement program. Therefore, the SNAP is funded at 100%. However, the WIC program is not an entitlement program. In the year 2011, the House Republicans were in favor of cutting the WIC program funds 10% (Coalition on Human Needs, 2011). In 1974, the FSP was extended to all states and territories. In 1977, President Carter signed the Food Stamps Act, which created a national standard of eligibility. In 1984, in Reading, PA, the first Electronic Benefits Transfer (EBT) purchase was made. In 2004, EBT cards were implemented nationwide, and in 2008 the FSP name was changed to SNAP. There are three companies that provide EBT for 49 states and three U.S. territories, which includes J.P Morgan EFS, eFunds, and Affiliated Computer Services.

Investigation for SNAP is delivered by the Government Accountability Institute (GAI). In Georgia, the USDA sets the standards for the SNAP and regulates retailer violations. The USDA also regulates Georgia SNAP clients' reporting requirements. In 2015 in Georgia, approximately 1.8 million individuals participated in the SNAP, and 838, 207 households joined monthly. Issuance for SNAP in Georgia for 2015 was \$2.8 billion dollars, according to the state activity report ("Supplemental Nutrition Assistance

Program,” 2015). The average monthly SNAP benefit per person in Georgia is \$129.76, and \$278.40 is the average monthly amount per household based on the 2015 report (“Supplemental Nutrition Assistance Program,” 2015). From a federal standpoint, \$70.6 billion in SNAP benefits were issued in the 2015 fiscal year, which is a 0.5% decrease compared to 2014. Furthermore, a monthly average of 22.5 million households and 22.5 million persons participated in the SNAP based on the reported findings (“Supplemental Nutrition Assistance Program,” 2015). Figure 1 provides a timeline for the history of SNAP.



Figure 1. Brief history of SNAP.

SNAP dates back as far as 1940, and the benefits are still relevant today in the year 2017 as a supplement to improve nutrition. SNAP fiscal Year 2017 reported that 42,609,852 people received SNAP benefits as of July 7, 2017 (FNS, 2017).

Roles Fruits and Vegetables Play in a Healthy Diet for SNAP Recipients

The SNAP provides monthly food assistance to income-eligible families and individuals. The SNAP benefits are deposited once a month on an EBT card. SNAP recipients are not mandated but are encouraged to purchase more fruits and vegetables with their EBT benefits. There are no rules or regulations enforced that control SNAP recipients' food choices. The main goal and purpose for the SNAP are to allow income-eligible families and individuals with the funds to purchase healthy foods and increase the presence of fruits and vegetables (Knäupper, McCollam, Rosen-Brown, Lacaille, Kelso & Roseman, 2011).

The phrase healthy foods can differ from person-to-person (Alkerwi, 2014). Hence, diet quality can foster several different meanings based on ones' knowledge of what that phrase means (Alkerwi, 2014). A balanced diet can be illustrated as food consumption that incorporates fruits, vegetables, whole grains, and fat-free or low-fat milk and milk products (Dietary Guidelines for Americans, 2015).

SNAP does not impose restrictions on the type of foods a recipient purchases. The cost of fruits and vegetables is an essential factor that SNAP recipients have to face since they are more costly in most cases compared to high calorie processed foods. Therefore, fruits and vegetables are the items that are selected less during grocery shopping. A person's perception of fruits and vegetables plays a significant role when it

comes to one's diet. If a SNAP recipient thinks fruits and vegetables are too costly, he or she will be reluctant to purchase fruits and vegetables in large quantities (Piontak & Schulman, 2014).

The lack of access also plays a significant role in the food selections SNAP recipients make. Access to a variety of fruits and vegetables may be limited for individuals that reside in urban areas. Also, the lack of transportation is a critical factor in the lack of access. Metropolitan areas lack local Farmers' Markets and neighbor grocery stores (Walker et al., 2011). On the other hand, the lack of familiarity with healthy foods is another challenge that SNAP recipients face. One's diet can reveal the overall quality of a person's health.

Improving Health

SNAP benefits are designed to maintain the health of SNAP recipients with nutritious foods (Moran, 2011). SNAP benefits provide lower socioeconomic families and individuals with access to food without any associated financial cost. Since SNAP recipients do not have to use their earnings or personal cash to purchase food, the objective of the program is to offer the recipients with food options without any financial burdens. Therefore, by alleviating the financial challenges related to purchasing fruits and vegetables, SNAP recipients have the option to purchase more fruits and vegetables. Fruits and vegetables are composed of vitamins and minerals that enforce a healthy body weight and preventable chronic diseases. SNAP benefits assist vulnerable populations

with the opportunity to receive free foods with the hope that the SNAP recipients will purchase wholesome foods for their households. To improve one's health, there must be drastic changes in his or her diet (Goldberg, 2013).

Promoting a Healthy Diet

Promotion of consumption of healthy foods such as fruits and vegetables is one of the goals of the SNAP program (Lynch, 2011). A national food policy that promotes the consumption of healthy foods to be sold in local and neighborhood grocery stores may help bridge access issues for SNAP recipients. Dietary recommendations for children and adults may vary greatly depending on age and gender (Black & Billette, 2013). Another goal of the SNAP program is to increase the understanding and health-promoting eating behaviors to lower chronic diseases. The SNAP program is one of the nation's most extensive nutrition programs; therefore, the program impacts the nation's low-income household's diet quality.

SNAP-ED is a program implemented to enhance SNAP recipients' buying behaviors to increase healthy eating habits while on a limited budget. SNAP-ED provides meal planning, shopping, and budgeting via the FNS USDA (Food and Nutrition Service United States Department of Agriculture) website. SNAP-ED is voluntary, unlike WIC counseling, which is mandatory to continue receiving the benefits. Moreover, the Food, Nutrition, and Conservation Act of 2008 (also known as the Farm Bill) granted \$20 million dollars that was designed for pilot programs to evaluate health

and nutrition promotion in the SNAP. This funding has been used to source Georgia SNAP-ED nutrition education programs. SNAP-ED's goal is to enhance the likelihood that SNAP recipients will make healthy choices with their monthly SNAP benefits. The Expanded Food and Nutrition Education Program (EFNE), the Nutrition Services Incentive Program (NSIP), the Commodity Supplemental Food Program (CSFP), and the DoD Fresh Fruit and Vegetable Program are programs and services that are administrated and funded by the USDA.

Nutrition Food Policy

A food policy may support changes in SNAP recipients purchasing behaviors. For example, stipulations could be in a place that would prohibit SNAP benefits from being redeemed for soft drinks and candy due to their empty calorie composition. Food policy can prohibit the purchase of the item with SNAP benefits to coincide with WIC approved items. By implementing a food policy regarding the SNAP program, leaders will be able to regulate the type of purchases made using the benefits (Barnhill & King, 2013). The agenda for governing the SNAP purchases is to restrict sugary foods and enforce milk, eggs, cheese, whole grains bread and cereals, fruits, vegetables, peanut butter, canned tuna in water, canned pink salmon, and 100% juice to be purchased with SNAP benefits. Federal nutrition programs such as (WIC) only allow recipients to buy certain foods with WIC vouchers.

There are mixed reviews regarding SNAP as food policy; there are views that express compliance, and there are viewpoints that state a food policy is unnecessary and unjust (Hood, Martinez-Donate & Meinen, 2012). In January 2017, Philadelphia, Pennsylvania, imposed the first soda/surgery drink tax on all drinks that contain added sugar or artificial sweeteners to encourage the residents to lessen their frequency of soda intake. The soda tax was imposed on the distributor, passed on to retailers and, therefore, added to the overall increased price of the drink. Low-income families will be affected the most by the soda tax because this particular economic class consumes the most added sugar drinks. Jim Kenney, the mayor of Philadelphia, suggested a proposal that required an extra 1.5 cent sales tax per ounce of sugary drinks, and it was approved in January 2017. The original plan of 3 cents sales tax per ounce was denied. The soda tax funds, which are estimated to be \$90 million dollars, will be used for funding pre-kindergarten programs, parks, and recreation centers within Philadelphia. The soda tax goal is to lower obesity rates and encourage consumers to select healthier beverages. Obesity can cause health issues that can be adverse to one's quality of life. The overall mission of the tax was to improve the health of the residents of Philadelphia by causing a change of behavior. Local small businesses did not welcome the soda tax, and residents stated that the tax infringed upon the consumer's freedom of choice.

In 2014, San Francisco, California, implemented a soda tax as well. San Francisco reportedly had taxpayers that paid \$750 million dollars per year in healthcare

costs, and half of San Franciscans are overweight or obese. The beverage industry created campaigns that were opposed to the soda tax that stated that the tax would harm business and consumers. Research has shown that educating consumers to make healthier choices will change the consumers' behaviors temporarily, and will not be ongoing (Hood, Martinez-Donate & Meinen, 2012). Nutrition education changes attitudes and increases knowledge but does not have a long-term effect on the change of behavior. Thus, a sales tax will be beneficial to San Francisco. Public health concerns are addressed with the most effective outcome when intervention solutions involve taxation. In other words, the higher the product is priced, the likelihood that the item will be consumed will be lowered. Several viewpoints toward the soda tax varied from believing that drinking soda is an unhealthy behavior that has adverse effects, such as increasing healthcare costs due to its correlation to obesity. Illnesses are related to unhealthy behaviors; drinking soda reduces productivity within the workplace as a result of the low quality of health due to individuals over-consuming soda daily instead of water or non-sugary drinks.

SNAP participants spend 22.8% of their SNAP benefits on sugary foods and drinks and 11.9% on fruit and vegetables. According to the USDA, 20% of non-SNAP shoppers purchased sweet foods and beverages and 16.3% fruits and vegetables (Food and Nutrition Services United States Department of Agriculture, 2017). The SNAP does not currently give specific food or meals, and SNAP participants' food choices are not

regulated. However, the SNAP is guided throughout the SNAP-ED and the Expanded Food and Nutrition Education Program, which encourages the USDA's 7teaspoons or less daily recommended amount of sugar intake (Food and Nutrition Services United States Department of Agriculture, 2017).

WIC Program History

The Woman Infants and Children (WIC) program is a federally funded program designed to offer low-income pregnant women and children up to the age of five with nutrition education and food vouchers (Chiasson et al., 2013). At the federal level, the WIC program specifies that certain foods that can be purchased with the WIC vouchers, and mandatory nutrition education counseling for clients is required. Nutrition counseling must be completed every three months. WIC was implemented in 1974; the program offers mandatory nutrition education and healthcare referrals. The WIC approved food items are aligned with the Institute of Medicine to ensure that WIC food packages provide healthy foods. The WIC program is structured very differently from the SNAP program. For instance, WIC recipients are required to complete a nutrition counseling session to continue to receive food vouchers (Kharofa, Meurer & Nelson, 2014). Also, the WIC program mandates what can and can be purchased with the food vouchers. For example, milk, eggs, cheese, whole grains bread and cereals, fruits, vegetables, peanut butter, canned tuna in water, canned pink salmon, 100% juice, and

infant formula can be purchased with WIC vouchers (Weedn, Ang Zeman, & Darden, 2012).

What is WIC's History?

- **1972:** WIC was piloted as a supplemental food program aimed at improving the health of pregnant mothers, infants and children in response to growing concern over malnutrition among many poverty-stricken mothers and young children.
- **1974:** The first WIC site opened in Kentucky in January.
- **1974:** WIC was operating in 45 States.
- **1975:** WIC was established as a permanent Program by legislation P.L. 94-105.
- **1975:** Eligibility was extended to nonbreastfeeding women (up to 6 months postpartum) and children up to age 5. WIC had initially provided supplemental foods to children up to age 4 and to breast-feeding postpartum mothers.
- **1978:** Legislation introduced new elements into the Program:
 - Nutrition education must be provided.
 - The supplemental foods should contain nutrients found lacking in the target population, and have relatively low levels of fat, sugar, and salt.
 - States needed to coordinate referrals to social services including immunization, alcohol and drug abuse prevention, child abuse counseling, and family planning.
- **1992:** WIC introduced an enhanced food package for exclusively breastfeeding mothers to further promote breastfeeding.
- **1997:** USDA implemented **Loving Support Makes Breastfeeding Work** campaign to increase breastfeeding rates among WIC mothers and improve public support of breastfeeding.
- **2004:** The **Breastfeeding Peer Counselor initiative** was launched: Women with breastfeeding experience and training (often past WIC participants) became counselors to support other women learning to breastfeed.
- **2009:** Based on Institute of Medicine **recommendations**, USDA introduced a new food package with foods consistent with the Dietary Guidelines for American and established dietary recommendations for infants and children over two years of age. Fruits, vegetables, and culturally sensitive substitutes for WIC foods are now part of the WIC food package. In addition, mothers who exclusively breastfeed receive more healthy foods with the enhanced WIC food package for exclusively breastfeeding mothers.

Figure 2. Timeline of WIC history.

The SNAP program does not restrict the recipient's purchases like WIC. The only banned purchases include alcoholic beverages, tobacco, and hot foods. Unhealthy foods and beverages such as soft drinks, candy, cookies, and sugary cakes can be

purchased with SNAP benefits (Dannefer et al., 2015). The FNS USDA states that categorizing foods as healthy and unhealthy will be too complicated for retailers and will cause a stigma for SNAP recipients. More specifically, the FNS USDA) suggests incentives and health promotion rather than restrictions. The HIP is a federally funded project located in Hampden County, Massachusetts that gives SNAP recipients 30 cents at point-of-sale for every dollar spent on fruits and vegetables (Barlett et al., 2013).

Practices in Nutrition Education for Low-Income Audiences

Nutrition education is most effective when it is delivered through multiple levels of the social-ecological model. One should also use the most current dietary guidelines for Americans as evidence-based content. The dietary guidelines for Americans are based on the USDA and the Center for Nutrition Policy and Promotion guidelines. The evaluation of the program design should be linked to program delivery and educator training as well. Nutrition education practices should be supported by evidence. Effective methods would increase consistency and efficacy in evaluation, program planning, and implementation (MacKinnon et al., 2014). A theoretical base, focus on goal setting, associated with research-based content, and it uses language suitable for the audience leaning style. A WIC nutrition education study was conducted, and the results concluded that the current nutrition education material was time-consuming and was not responsive to the client's needs, and supplemental resources were needed to occupy the client's children. At the same time, he or she attended the education session (Greenblatt et

al., 2016). To resolve this issue, the education material was revised, and new interactive videos were presented that focused on the child- friendly preparation of WIC approved foods (Greenblatt et al., 2016). A WIC study conducted in Texas utilized online surveys, and telephone interviews revealed that 2-way communication between the client and the other domain is highly needed for a successful learning outcome (Isbell, Seth, Atwood & Ray, 2014).

In Missouri, the SNAP-Ed program offers experiential cooking classes that allow SNAP clients to participate in nutrition cooking classes and prepare budget-friendly healthy meals (Karanja, 2014). After attending the experiential cooking classes, the SNAP clients reported that fruit and vegetable intake was increased, and whole grain and lean meat consumption was significantly improved (Karanja, 2014). Eighteen FMs located in New York City hosted FM based cooking classes for SNAP recipients; the classes enhanced self-efficacy and increased the client's fruit and vegetable intake (Dannefer et al., 2015).

Pennsylvania's SNAP program offers an optional online nutrition education program. Researchers found that Pennsylvania's online nutrition education program offered via Facebook was a cost-effective strategy (Lohse & Wamboldt, 2013). The online nutrition base program evaluation surveys asked questions to reveal if the program was helpful, the amount of information was sufficient, and if the speed of the program was suitable (Lohse & Wamboldt, 2013). The results of the survey revealed that the

participants mostly prepared homemade meals four times a week. Meals that were categorized as healthy, meaning low fat and or low-sodium were elected less frequently.

Government Nutrition Programs

WIC clients participate in SNAP, National School Lunch (NSLP), School Breakfast Program (SBP), Summer Food Program (SFSP), and the Child and Adult Care Food Program (CACFP) because the programs are low-income biased. The Healthy Hunger-Free Kids Act allows the USDA to enhance nutrition (FNS USDA, 2017). The NSLP provides free or low cost nutritionally wholesome lunches to school children that attend public or nonprofit schools and residential child care institutions. SBP provides funding to the same institutions as NSLP; however, it is designed for breakfast. SFSP offers meals to the same low-income populations during the summer while the children are out of school for summer break. CACFP provides the same concept as the previously mentioned government nutrition programs for childcare agencies, adult daycares, and adult group homes or elderly and disabled (FNS USDA, 2017).

Summary and Conclusion

Excessive amounts of sugar and fatty foods can cause obesity and chronic disease. Thus, a healthy diet that includes a daily intake of fruits and vegetables and physical activity lower one's risk of chronic illnesses such as heart disease, stroke, diabetes, cancer, and hypertension (Von Ruesten, Feller, Bergmann & Boeing, 2013). Hence by making programs such as SNAP-ED mandatory, the perception that SNAP recipients

have towards fruits and vegetables may change due to more awareness and nutrition education (Lynch, 2011).

A SNAP research study concluded that clients purchased more fruits and vegetables when they received incentives that can be converted into Farmers' Market cash (Savoie-Roskos, Durward, Jeweks & LeBlanc, 2016). Establishments of fruit and vegetable banks and fruit and vegetable pantries in areas that have limited access to fruits and vegetables at an affordable rate are benefits for the community (Juby & Meyer, 2011). New York City has fruit and vegetable banks governed by SNAP-ED named Just Say Yes (JSY) to Fruits and Vegetables. In Georgia, the SNAP-ED is geared toward nutrition class/session for elementary students ("Just Say Yes," 2015). The Georgia SNAP-ED implemented the program health Powers; its mission is to increase elementary student's health-enhancing behaviors (HealthM Power, 2016). The state of Georgia also participates in the Cooking Matters program, which is a division of the No Kid Hungry campaign. Both programs are designed for SNAP participants to improve eating habits. Moreover, in north Georgia, the Northwest Regional Cancer Coalition and Georgia Coalition for Physical Activity & Nutrition implemented, and Cooking Matters program are related to SNAP-ED.

Southwest Georgia does not have any Cooking Matter programs. SNAP recipients will need to change their eating habits and incorporate more fruits and vegetables into their daily diet, which can happen when obtaining fruits and vegetables is

more feasible (DiClemente et al., 2015). On August 16, 2017, the American Security News Reports stated that Sonny Perdue, the U.S. Secretary of Agriculture, announced that \$16.8 million dollars in grants would be issued to organizations to increase SNAP participants' fruit and vegetable intake. The grant is an ultimate act of positive social change to improve the fruit and vegetable intake among low-income families and individuals (“\$16.8 million”, 2017).

Chapter 3: Research Methods

Introduction

This chapter explains the research methods that were used in this study. The study involved implementing a qualitative approach, and interviews were conducted with SNAP recipients. This study focused on perceptions of fruits and vegetables amongst SNAP recipients who reside in Georgia. Qualitative research allowed common themes to emerge for analysis.

Research Design and Rationale

The research questions were as follows:

RQ1: What are the perceptions amongst Georgia SNAP recipients regarding healthy eating and the importance of daily intake of fruits and vegetables?

RQ2: What are Georgia SNAP recipients' perceptions of nutrition education?

For this study, a qualitative research design was used. The qualitative approach was used because it allowed any patterns that were present to appear and reveal motives involving SNAP recipients' perceptions of fruits and vegetables. The qualitative method also aided in terms of discovering how and why SNAP recipients have individual perceptions regarding fruits and vegetables. Interviews were conducted because they allowed participants to explain their viewpoints through a guided set of questions. The interview questions were initially general and involved standard terms. Complex questions were asked towards the end of each interview. Interview questions were open

concrete questions that allowed SNAP recipients to express in detail their opinions and viewpoints. Open, clear, and direct questions also allowed SNAP recipients to discuss their feelings in intimate detail.

Role of the Researcher

The researcher served as an observer and facilitator of interviews. To eliminate ethical issues, the researcher ensured that consent forms were issued, reviewed, and signed by all participants. Walden IRB approval was obtained before data collection began. IRB approval was vital because it ensured that correct actions were taken during the data collection process and participants were protected. The researcher was held accountable for keeping SNAP recipients' names and identities confidential. The researcher took field notes that consisted of verbal and nonverbal communications that took place during face-to-face interviews. The interviews were audio-recorded to ensure accuracy and quality. Audio was transcribed and reviewed for accuracy. Data collected from the study were kept secure in a password-protected laptop. The laptop was kept in a locked file cabinet when not in use. Data will be kept for at least 5 years, as required by Walden University. Audio recordings of interviews were also stored in a locked file cabinet.

Methodology

The population of this study was comprised of adults 18 years and older living in Albany, Georgia, who received SNAP benefits. Interviews were conducted until the

point of saturation and no different information was yielded from interviewees. The participants were recruited from Albany Beauty Academy, LLC. Albany Beauty Academy, LLC. is a privately-owned cosmetology school, and all students are SNAP recipients. Participants volunteered to participate in the study and received a \$5 grocery store gift card for their time and participation efforts. The basic qualitative research methodology was used during this study, and open-ended and probing questions that led to textural and structural descriptive responses were asked. Basic qualitative research methodology focuses on interpretations and descriptions; it involves the subjectivity of people's perceptions and attitudes (Merriam, 2009). Basic qualitative research also emphasizes people's feelings, beliefs, and emotions. Saturation was present when no new or innovative information was yielded from the interviews. The researcher anticipated conducting at least 20 interviews to achieve saturation. The researcher also ran an analysis to determine if saturation had been achieved when 20 interviews were reached. In qualitative research, there are not any particular designated sample sizes (Marshall, Cardon, Poddar, & Fontenot, 2013). Hence, saturation was achieved before the sample size was determined. Quantitative methods were implemented to test and confirm a hypothesis.

Interviews were audio-recorded. An external transcription service was used to transcribe audio for interviews. Interview transcripts were analyzed for significant statements and essential phrases that were categorized into themes. The researcher used

NVivo 10 version 2012 qualitative data analysis software to analyze collected data, and this will be discussed in detail in the data analysis section. The researcher used the Olympus V414111SU000 Digital Dm-720 Voice Recorder for this study. The terms that continually reoccurred were developed into themes. The themes were listed as textural and structural descriptions to describe what SNAP recipients experienced.

Participant Section Logic

Participants were recruited via Albany Beauty Academy, LLC. Students were SNAP recipients, and their identities were not disclosed during the data collection process. Using local SNAP recipients was a cost-effective means of recruiting recipients promptly. Social web sites to select participants were another way to avoid bias because they provide the same level of identity confidentiality as other research recruitment tools (Kosinski, Matz, Gosling, Popov & Stillwell, 2015). The researcher avoided bias by maintaining an impartial department and by not indicating that the participants' responses were right or incorrect. The researcher was granted a letter of cooperation and gained consent from the Albany Beauty Academy, LLC owner to recruit participants. Also, the researcher was given IRB approval from Walden University IRB before beginning recruitment and data collection.

Instrumentation

The researcher developed the interview questions to ensure personal responsiveness. Also, a pilot test for the consent form and interview questions was

completed to ensure the consent process was adequate and interview questions got the responses that were needed to answer the research questions. The instrument was given to a few participants to check the internal consistency. Hence, predictive validity was used to compare results from interviews that were conducted during the study. Interview questions were measured with face validity, meaning they were created from relevant derived scholarly information. The instrument consisted of eight open-ended qualitative interview questions that asked participants about their perceptions of fruits and vegetables and nutrition education.

Procedures for Recruitment, Participation, and Collection

All SNAP recipients who participated in the study were given a complimentary gift card to a local grocery store. To have a valid study, at least 20 interviews and five pilot interviews were completed. The point of saturation occurred when no new information was provided from participant responses during the interviews. Names and personal information, such as income and physical address, were not disclosed. The researcher also obtained consent from the owner of the Albany Beauty Academy, LLC, and from Walden University IRB before recruitment or interviews were conducted. The SNAP clients also completed consent forms. The SNAP recipients had the option to withdraw at any time without any penalties. Transcribe Me.com was used for the transcription of the data collected from the interviews. The interviews were recorded, and recordings were stored on a password-protected computer in a locked cabinet located

in the primary researcher's office. Also, all analysis was completed and stored on a password-protected computer.

Data Analysis Plan

The data collected from the interviews were analyzed by NVivo 10 version 2012. This software package allowed the researcher to identify reoccurring patterns in the themes. The NVivo 10 version 2012 software text analysis feature allowed the researcher to identify the themes in the data. The researcher interpreted the meanings and interpretations of the data. A word frequency query revealed which words that often reappeared within the SNAP clients' responses. Once a query was ran, the researcher was able to see the number of times certain words occurred in the data. The queried data results were also displayed as a tree map. For example, the words cost and access appeared several times within the participants' interview responses.

Issues of Trustworthiness

The SNAP clients were informed that the study would not have any effect on his or her SNAP benefits, each participant was a volunteer, and everyone was given the option to stop participation at any time with no consequences. SNAP participants were given a copy of the interview transcripts to enhance accuracy and to incorporate member checking. Validity is the ability to measure accuracy within the research. Interpretive validity, for example, allowed the researcher to present the viewpoints of the SNAP clients accurately. As a result of member checking, the researcher allowed the SNAP

client to view and read his or her interview responses. This ensured that the researcher documented the SNAP client's viewpoint the way he or she intended to express it. Hence, participant feedback increased clarity and assured that the responses that the researcher documented were an accurate reflection of the SNAP client's interview question response.

Ethical Procedures

This study involved human participants, and institutional review board (IRB) approval was obtained from Walden University along with consent from the Albany Beauty Academy, LLC owner, to recruit participants. All participants in the study received and completed an informed consent form. The researcher also signed a confidentiality agreement. The participants received a \$5 gift card from a local grocery store as an incentive for the use of their time. To preserve the participant's identity, the data collected were stored on password-protected files in a locked storage cabinet, and pseudonyms were used for each participant.

Summary

This study was conducted in a nonbiased manner to ensure the SNAP recipients' identities remained protected. IRB approval from all necessary parties was obtained legally. Ethics were upheld to adhere to Walden's research guidelines during all elements of the study. Once the data were collected from the SNAP recipients, the results were analyzed.

Chapter 4: Results

Introduction

The purpose of this study was to assess perceptions of the importance of fruits and vegetables amongst SNAP recipients. The research questions were as follows:

RQ1: What are the opinions amongst Georgia SNAP recipients regarding healthy eating and the importance of daily intake of fruits and vegetables?

RQ2: What are Georgia SNAP recipients' perceptions of nutrition education?

Chapter 4 will consist of a brief introduction, a description of the pilot study, setting, demographics, and data collection, data analysis, evidence of trustworthiness, results, and a summary.

When participants were asked about healthy eating, typical responses referred to fruits and vegetables. Fruits and vegetables are the primary sources of vitamins and minerals (Davy et al., 2015). An adequate amount of vitamins and minerals are necessary to maintain wellness (Boeing et al., 2012).

P20 said verbatim:

Eating healthy means making sure I eat fruits and vegetables and putting healthy foods on my plate, making sure I incorporate healthy eating into my daily diet because I know sometimes it can be hard. However, I try to eat fruits and vegetables, just daily.

Pilot Study

Five people were interviewed for the pilot study because the researcher needed to test the interview questions to ensure they would yield suitable responses. After the pilot study was completed, there were no changes in terms of instrumentation or analysis strategies in the primary research. The pilot test was conducted to highlight any concerns and problems with the recruiting of participants. The pilot test also allowed the researcher to identify interview questions that may have needed modifying. The pilot test was significant because it involved examining the quality of the interview questions and the recruitment process. The pilot test provided an assessment of the overall recruiting process. Also, the pilot test allowed the researcher to evaluate the recruiting process and interview question quality.

Research Setting

The in-person pilot interviews took place at Albany Beauty Academy, LLC in a vacant room. The researcher pilot tested the interview questions to ensure that they were worded correctly so that interviewee responses could yield appropriate answers. A prescreening questionnaire was required for each participant to complete before conducting the full interview to ensure that the participant was eligible to proceed. The instrument consisted of seven demographic questions and 13 open-ended qualitative interview questions that involved Albany SNAP recipients' perceptions of fruits and

vegetables and nutrition education. All participants received a Publix Super Market \$5 gift card as an incentive for their time.

Demographics

This qualitative study consisted of 20 participants who received SNAP in Albany, GA. The mean age of participants was 22 years old. The participants provided an overview of their background by answering demographic questions regarding age, sex, race, marital status, and education level (see Table 3). The participants were 89% Black ($n = 17$), 10% two or more races ($n = 2$), and 1% Caucasian (1%). Fifteen percent ($n = 3$) were male, and 85% ($n = 17$) were female.

Table 1

Participant Demographics

Interviewees	Age	Sex	Race	Marital Status	Education Level	Number of Children	Years/Months in SNAP
Interview 1	20	female	black	single	12 th grade	3	Five years
Interview 2	19	female	Caucasian	single	1Yr college	1	6 months
Interview 3	28	male	black	divorced	12 th grade	2	5 years
Interview 4	18	female	black	single	12 grade	1	2 years
Interview 5	21	male	black	married	GED	0	1 year
Interview 6	21	female	bi-racial	single	Bachelor's degree	3	4 years
Interview 7	19	female	black	single	12 th grade	0	2 months
Interview 8	25	female	black	married	12 grade	2	4 years
Interview 9	20	female	black	single	1 Yr college	0	3 years
Interview 10	32	male	black	single	12 grade	2	5 years
Interview 11	29	female	black	single	12 grade	1	2 years
Interview 12	26	female	black	divorce	12 grade	2	3 years
Interview 13	19	female	black	married	12 grade	0	1 year

Interview 14	20	female	black	single	1 Yr college	1	2 years
Interview 15	22	female	black	divorced	Bachelors	2	2 years
Interview 16	20	female	bi-racial	single	12 grade	0	7 months
Interview 17	21	female	black	married	12 grade	0	5 years
Interview 18	19	female	black	single	12 grade	1	1 year
Interview 19	19	female	black	single	Associate degree	0	1 yr. & 3 months
Interview 20	23	female	black	married	12 grade	2	1year

Data Collection

When asked what kind of foods the participants eat daily, several different types of fruits were listed. For example, P3 stated verbatim: “Bananas, oranges, and apple. Sometime, I would give the kids the-- I would give them, but it is sweet the grapes. They a little sweet. I do not give them too many grapes, but I give them grapes every once in a while.”

According to P3 verbatim:

Yes, because they let us know how you can prepare your food, well, the amount that you serve on your plate. The pamphlets that they give, the information is convenient.

According to P5 verbatim:

Yes. I really cannot complain. Yes, they do a good job. Some friendly people work there.

According to P4 verbatim:

I will learn how to cook different foods. There are some new recipes, so I won't have to eat the same thing over and over.

Data Analysis

Data were analyzed using NVivo qualitative data analysis software. NVivo allowed the researcher to identify reoccurring patterns in the themes. The researcher interpreted the trends in the data and used the node option to create codes. Coding allowed the researcher to organize the interview data into manageable parts, and it also provided access to pertinent data analysis more rapidly. Also, the data source files created in NVivo allowed the researcher to organize the data after the reoccurring themes were discovered within the data. The researcher used original research questions as a guide, while the themes from the data were created. The coding scheme that the researcher created in NVivo reflected the themes that were persistently found in the interview data. NVivo's word frequency queries and text search allowed the data to be explored for repeatedly used terms and phrases.

Theme 1: Fruits and Vegetables are Healthy

Twenty participants were interviewed during this study. During the in-depth, open-ended interviews, participants were asked about their experiences with the SNAP nutrition education. When asked about what they have learned from SNAP nutrition education, participants noted that fruits and vegetables are healthy.

According to P20 verbatim:

I learned that fruits and vegetables are essential and eating whole grain and wheat bread versus white bread. Wheat bread is healthier because it has more fiber.

According to interview P10 verbatim:

I learned how to balance vegetables and meat. And I learned how to be smart. Breakfast should be the biggest meal...the main thing is breakfast. So I learned that the most significant meal should be breakfast, and the rest of the meals for the day can be a little lighter.

Theme 2: local SNAP office does an excellent job of providing nutrition education.

The Albany SNAP office provides all SNAP recipients paper-based nutrition education materials. A paper brochure is issued to each SNAP recipient during the initial application process. The SNAP recipients are free to ask any questions they may have in regards to the nutrition materials. The SNAP case manager addresses all concerns and questions about SNAP nutrition education.

According to P3:

Yes, because they let me know how I can prepare my food...well the amount of food that I should place on my plate. The pamphlets that give us ... the information is very handy.

According to interview participant number 5, question #11 (verbatim):

Yes. I really can't complain. Yes, they do a good job. There's some nice people that work there.

According to interview participant number 7, question #11 (verbatim):

Okay. Yes. They do a good job. It's okay.

According to interview participant number 17, question # 11 (verbatim):

Sure. Yes. Of course. I can't complain.

Additional themes arose that were not associated with the study's initial research questions. The term meat reoccurred several times within the interview responses.

Theme 3: Meat

The SNAP recipients reiterated several times that meat was associated with unhealthy eating habits. Some interviewees expressed a concern that consuming too much meat can lead to health issues. Therefore, consuming too meat is the third theme in this study.

According to interview participant number 2, question #10 (verbatim):

To me, eating healthy means eating the right foods such as organic fruits and vegetables, and no fast food, no red meat, pork, or any of that.

According to interview participant number 19, question #10 (verbatim):

It means eating more fruits and vegetables, as many as possible, different colors and different types.

According to interview participant number 14, question #14 (verbatim):

What I have learned with my parents-- basically, my father, every time he would eat pork, he would have headaches. Pork, greases food. And it doesn't digest in my father's system that well. So I would say the pork, even sometimes chicken because chicken can create a lot of grease. When they tell you, "Don't eat fried food," it's the same if you eat (boiled) food. If you eat the grease [off it?], it's still the same. So I will say the greasy food, the fried food, pork, chicken, all that, beef, it's not good for the body.

According to interview participant number 5, question #14 (verbatim):

That could be beef, pork, and fried chicken. Fast food, of course. McDonald's is just a death trap.

Evidence of Trustworthiness

As stated in chapter 3, the SNAP clients were informed that the study would not have any effect on his or her SNAP benefits, and their participation was solely voluntary with the option to stop the interview at any time. SNAP participants were given a copy of the interview transcripts to review for accuracy and revisions. Validity is the ability to measure accuracy within the research. Interpretive validity, for example, allowed the researcher to present the viewpoints of the SNAP clients accurately. Also, throughout participant feedback, the researcher was able to enable the SNAP client to view and read his or her responses. This ensured that the researcher documented the SNAP client's viewpoint the way he or she intended to express it. Hence, the participant's feedback

increased clarity and assured that the recorded responses were an accurate reflection of the SNAP client's interview question response.

Transcript Review

The transcript of the interviews were shared with participants to ensure accuracy. The transcript review took place in the same private room. The interviews were conducted during non-academic hours.

Sharing Results

The results were summarized and will be shared with participants in an easily understandable format. A one to two-page summary in layman terms will be shared with the participants after the study is completed, and the researcher's degree has been conferred. Sharing the results will take place in the same private room that the interviews were conducted during non-academic hours. The data summary can be found in the Appendix H. When asked about their perceptions of healthy eating, the interviewees understood that it is important to eat fruits and vegetables daily to decrease their chances of being affected by chronic diseases that are related to food. Regarding nutrition education, the participants stated in the interviews that the nutrition education the SNAP office provides is helpful and beneficial.

Summary

This was a qualitative study, and the collected data consisted of 20 interviews. Based on the results, the participants stated that the SNAP office does a suitable job of

providing nutrition education material. The participants noted that the SNAP office should continue to provide nutrition education via paper copy and not email, text, or video. The interviewees stated that they were aware that their overall health might be compromised when they do not consume fruits and vegetables daily. The participants stated that they do eat fruits and vegetables, but they enjoy all types of foods. Hence, the participants were going to eat foods that they were comfortable with and foods that they were accustomed to eating due to their personal preferences. The nutrition education via a paper copy from the SNAP office is viewed as a friendly reminder to purchase fruits and vegetables. However, SNAP clients make purchases that are based on familiarity and personal desires. Chapter 5 will discuss the nature of the study and a summary of the study findings and limitations of the study. Also, recommendations for future research and positive social change impact of the study will be discussed in Chapter 5.

Chapter 5: Discussion, Recommendations, and Conclusion

Introduction

Forty-three thousand people or 60% of the population of Albany, GA receive SNAP benefits (FNS USDA, 2017). After reviewing several databases, the researcher discovered a gap in literature regarding SNAP recipients' perceptions of the importance of fruits and vegetables. In this study, a basic qualitative research methodology was used to narrow the identified gap in the literature.

Interpretation of the Key Findings

Based on the research gap discussed in Chapter 2, this study helps to fill a gap involving SNAP recipients' perceptions of fruits and vegetables. Fruit and vegetable consumption is beneficial to one's overall health. Hence, a balanced diet can lower the risk of several chronic diseases such as type 2 diabetes, stroke, and heart disease (Juby & Meyer, 2011). This study revealed the opinions and viewpoints of SNAP recipients in Georgia regarding fruits and vegetables. Furthermore, existing literature did support the study findings and themes.

RQ1

RQ1: What are the perceptions amongst Georgia SNAP recipients regarding healthy eating and the importance of daily intake of fruits and vegetables?

The interviewees stated that eating healthy was essential because it lowers their risk for diseases. P3 said:

Eating healthy...Eating more nutritious foods that are composed of fruits and vegetables will help us live longer and have lower blood pressure.

Eating healthy means eating more fruits and vegetables daily to maintain overall good health (Liu, 2013). Eating fruits and vegetables daily can become complicated when one has a demanding schedule. Fast food is often consumed because working parents and individuals do not have time to cook and prepare meals at home (Boeing et al., 2012). Fast food, fried food, and fatty red meats can increase one's chances of having diseases per the interviewees.

P20 said:

Red meat is bad for you, so any type of red meat like pork and beef.

Interview question number 13 was about what kind of foods participants ate daily. Salads, broccoli, squash, and zucchini were mentioned during two of the interviews as a daily eaten food. Leafy green and cruciferous vegetables boost the immune system and can improve one's mood (Sanofer, 2014). Leafy green and cruciferous vegetables can decrease anxiety. Spinach, kale, lettuce, cabbage, arugula, bok choy, beet greens, collard greens, turnip greens, and swiss chard are considered leafy green vegetables. Vegetables can be purchased fresh or frozen. Frozen vegetables have the same nutrition value as fresh vegetables because they are packaged shortly after they are picked (Sanofer, 2014). Colorful fruits and vegetables have high levels of antioxidants. Fruits and vegetables

contain antioxidants that can prevent and slow down cell damage that leads to cancer (Wang, Meckling, Marcone, Kakuda, & Tsao, 2011).

According to P7 verbatim:

Like I said earlier, I make sure I eat a salad at least once a day because if I eat a salad once a day, I know I ate some fruits and vegetables.

According to P19 verbatim:

Well, I love juice. I love juice, and I love broccoli. I can have broccoli every day. However, zucchini and squash are my favorite vegetables.

RQ2

RQ2: What are Georgia SNAP recipients' perceptions of nutrition education?

The interviews confirmed that Georgia SNAP recipients perceived nutrition education provided by the program to be helpful. The SNAP program provides several helpful tips such as recipes and shopping tips. During SNAP nutrition education, interviewees stated that they expected that the SNAP would provide them with information regarding benefits of eating fruits and vegetables daily. Interviewees stated that paper copies involving nutrition education are preferred over email, text, or video. According to Dannefer et al. (2015), SNAP recipients prefer paper-based nutrition education because it allows them a tangible resource that they can take home. The

interviewees also stated that their local SNAP office does a good job of providing nutrition education resources.

According to P3:

Yes, because SNAP lets us know how you can prepare your food, well, the amount that you serve on your plate. The pamphlets that SNAP gives the Information is convenient.

The participants also mentioned that they learned from the SNAP that fruits and vegetables should be incorporated into each meal.

According to P4:

I make sure I eat fruits and vegetables by including a fruit and vegetable each meal. So each meal I eat. I just make sure I have a fruit or vegetable on my plate.

According to P9 verbatim:

I eat from all the food groups. I just make sure I eat from each food group.

For example, the Child Nutrition Policies and Recommendations journal article states the United States reliance on cheap food that is high in calories and low in nutrients precipitates malnutrition in low-income families that can lead to obesity, diabetes, and other adverse health conditions in children (Juby & Meyer, 2011).

Limitations of the Study

Data were only collected from a small cohort of SNAP recipients who resided in Albany, Georgia. Therefore, the data only addressed the opinions of SNAP recipients

that lived in one area and not the entire state. Therefore, the fact that time with participants was short and brief is a limitation for this qualitative study. This was a limitation because the participants did not give detailed responses. Brief responses limited the amount of data I received. According to the Cues to Deception in an Interview Situation study, respondents had a decreased reaction in length with face-to-face (visual presence) interviews (Harrison, Hwalek, Raney & Fritz, 1978).

According to Harrison, Hwalek, Raney, and Fritz 144 subjects assumed either the role of an interviewer or the part of a respondent and then interacted under visual contact and no visual contact conditions (Harrison, Hwalek, Raney, and Fritz, 1978). Under each condition, the respondent was secretly instructed to answer six questions honestly and six questions deceptively. It was found that deceptive answers were hesitant and lengthy and visual presence increased variability in verbal response latencies and decreased response duration or length. However, interviewers tended to give respondents the benefit of the doubt, and they still discriminated between truth and falsehood, and increased hesitation and increased message length were associated with decreased believability (Harrison et al., 1978).

This study used qualitative research and the HBM as a conceptual framework. Limitations can arise when using the HBM. The researcher must consider that one limitation of the HBM is that it does not account for the emotional factors of health

behaviors because the HBM is cognitively constructed. Furthermore, cultural influences and previous dealings are also not taken into consideration when it comes to the HBM.

The number of participants compared to the number of SNAP recipients was a limitation. Moreover, the 2010 U.S. Census stated that Albany, Georgia had a population of 77,434, 39.9% of the population living under the poverty line based on federal guidelines for income and family size. Ideally, this research could have been more robust with more participants, but with 20 interviews conducted, themes were being repeated, and saturation occurred. This study was limited to people recruited from only one specific site and thus a larger sample across broader population may have given different results. Qualitative data was a limitation because I do not know what the women and men purchased in comparison to what was consumed, I did not request verification nor through visual observation or reviewing receipts.

Recommendations and Implications

Policy change and future research will help enhance this study. This study reflects that SNAP recipients in Albany GA perceive fruits and vegetables are ideal options for healthy eating. The state SNAP program should consider a proactive measure, such as eliminating items that contain refined sugar from SNAP purchases may help recipients to maintain the recommended daily fruit and vegetable intake (Heise et al., 2016). In this study, refined sugar is referred to as added sugar to food and beverages. For example, omitting refined sugar from SNAP purchases will help promote lower sugar intake

(Barnhill & King, 2013). Limiting the amounts of refined sugar that are purchased by SNAP recipients may help ensure less refined sugar is consumed. The policy recommendation for restricting the purchase of refined sugar has the potential to lower type 2 diabetes rates (Dannefer et al., 2015). The state SNAP program also should consider putting a limit on the amount of meat a household can purchase. Consuming too much meat can lead to undesirable health outcomes (Valli et al., 2019). Through additional research that include limiting the purchase of products featuring refined sugar may fill gaps in the literature.

Positive Social Change Local Recommendations

Based on this study, the first recommendation suggests that local community organizations offer weekend and evenings nutrition classes to SNAP recipients. The classes will not be mandatory; the classes will serve as an optional family-friendly community event. This will create positive social change because cooking at home increases more family time. The nutrition classes can be divided into two groups, one for adults and one for children. The classes may consist of hands-on cooking demonstrations that are family and budget-friendly and culturally appropriate. Cost-effective, healthy recipes that do not take a great deal of time to prepare and are supportive for a busy families (Tobey et al., 2017).

Hence, the more time SNAP recipients spend cooking healthy recipes, the better chance at increasing health outcomes and passing down a healthier lifestyle to children

and generations to come. For example, time spent cooking with children, which can be considered quality time, plus passing down family history recipes that are modified to be healthier—ultimately enlightening the next generation to make healthier food choices. The conversations families have while cooking can lead to passing down family values (Simmons & Chapman, 2012). Cooking at home allows parents and children to bond, teach the fundamentals of cooking, and the benefits of healthy cooking (Simmons & Chapman, 2012).

Collaborative Learning Positive Social Change Recommendation

The second recommendation focuses on non-profit organizations, grocery stores, and supermarkets from neighboring states collaborating to host workshops to share ideas and nutrition education material tips. A collaborative learning approach will create diversity and enhance the overall impact of the SNAP (Namdar, 2017). Each state can share best practices for delivering nutrition education. The workshops may improve the quality of the overall SNAP nutrition education experience, but that is not guaranteed. Hence intervention workshops are not guaranteed to enhance SNAP nutrition education. Workshop or intervention success rate has to be monitored, evaluated, assessed to measure its success rate (Ammerman, Ward, Benjamin, Ball, Sommers, Molloy, & Dodds, 2007). Learning, collaborative nutrition education workshop may encourage the SNAP program to expand education materials. SNAP recipients are currently satisfied

with the nutrition education. However, health professionals need to be proactive and continue to encourage healthier lifestyles for current and future SNAP recipients while evaluating SNAP recipient's needs and wants and tailoring education materials to meet these needs.

Cultural Competent Nutrition Education Positive Social Change Recommendation

The third recommendation will involve implementing culturally competent nutrition education webinars hosted by nonprofit organizations, grocery stores, and supermarkets. The non-profits should be funded to support SNAP education utilizing funding via the USDA. Webinars are ideal for distant collaborations efforts. Hence, webinars allow meetings to take place more conveniently with not extensively travel costs. During cultural competent nutrition education, webinars tips can be exchanged with different countries. Furthermore, different cultures (Caribbean, Greek, Chinese, Mexican, Spanish, Mediterranean, Moroccan, Vietnamese, Indian, Italian, French, British, Thai, and Turkish) can exchange ideas and nutrition educational material without physically traveling. The SNAP needs to continue offering online nutrition education as well as traditional paper education materials. Per the SNAP local office, no changes have been made to the nutrition education, because the participants are satisfied with the current methods of the SNAP nutrition education (Wyker, Jordan & Quigley, 2012). Based on this study's findings, the SNAP is currently providing adequate nutrition education based on the participant's responses during the interviews (Clayton, 2010). To

be effective, nutrition education content has to include aesthetic graphical designs, encouraging principles, and cultural relevance (Clayton, 2010). Based on the literature, the nutrition education that GA SNAP provides is sufficient. It is possible that interview question #11 yielded short answers because the participants wanted to rush the interview process to attend other personal priorities. There is a possibility that participants assumed that if they answered the question short and brief that he or she could proceed with their daily tasks and exit the interview faster. The participants were informed that he or she could stop the interview at any time and still receive a free gift card.

This study created positive social change for the interview participants because the study revealed that the participants are aware that fruits and vegetables are essential to maintain good health and mitigating diet can aid chronic diseases (Ojo, 2019). There are many low-income neighborhoods across the US that have food deserts limiting the availability of fruits and vegetables because transportation is another barrier to travel longer distances to where fresh fruits and vegetables are sold. Thus, one's community environment can impact access to fresh fruits and vegetables (Walker, Fryer, Butler, Keane, Kriska & Burke, 2011). This study also exhibited that the participants have free will, and it is their responsibility to maintain or change their eating habits to achieve or preserve their family's health and wellness. Moreover, during the interviews, no one mentioned that they lived in a food desert or that transportation was an issue, but this was not the focus of this research.

Positive Social Change

This study acknowledges the SNAP program's efforts to provide healthy food for people who otherwise would have difficulties purchasing the food. SNAP is a vital federal safety net food program. This study highlighted how Albany Georgia SNAP recipients are using knowledge from SNAP nutrition education materials to make healthier food choices for themselves and their families. On a broader scale, this study provided recognition that the SNAP nutrition education program is an essential part of the overall SNAP program. This study verifies that the Albany Georgia SNAP program is doing a good job providing nutrition education. A memorandum was submitted to the director to inform her the SNAP nutrition education program is well received by the SNAP recipients. The SNAP nutrition education program ensures it provides beneficial nutrition information in a manner that is easy to comprehend.

Conclusion

This study allowed SNAP recipients to share their perceptions about SNAP nutrition education and the importance of fruit and vegetables. Also, this study confirmed that the current SNAP nutrition education policy is beneficial and productive. Currently, the SNAP provides paper nutrition education materials to all SNAP recipients. Once a person applies for SNAP, he or she will receive a SNAP education brochure. Furthermore, SNAP-Ed should continue being offered as a supplement tool for learning new tips. The study also provided a platform for the SNAP recipients to be open and

honest about their true feelings in regards to fruits and vegetable significance as it relates to health. This study confirmed that the SNAP recipients that participated in the study appreciate the current nutrition education that the SNAP offers. The SNAP participants are thankful for the SNAP because the program helps them provide food to their families. The SNAP gives recipients peace. In other words, one will have one less thing to worry about, and he or she can focus on their family unit's other needs. Moreover, the SNAP makes it possible for families and individuals to purchase healthy foods at no cost to them.

References

About WIC.(n.d). Retrieved March 30, 2014, from <https://www.fns.usda.gov/wic/about-wic>

Academy of Nutrition and Dietetics. (2014, February 24). Family meals do more than put food on the table: The benefits of cooking, eating as a family. *ScienceDaily*.

Retrieved January 23, 2020 from

www.sciencedaily.com/releases/2014/02/140224092015.htm

Alkerwi, A. (2014). Diet quality concept. *Nutrition*, 30(6), 613-618.

doi:10.1016/j.nut.2013.10.001

- American Nutrition Association. (2017). TITLE OF WEB SITE? Retrieved from <http://americannutritionassociation.org/newsletter/usda-defines-food-deserts>
- Ammerman, A. S., Ward, D. S., Benjamin, S. E., Ball, S. C., Sommers, J. K., Molloy, M., & Dodds, J. M. (2007). An intervention to promote healthy weight: Nutrition and Physical Activity Self-Assessment for Child Care (NAP SACC) theory and design. *Preventing Chronic Disease, 4*(3), A67-A67.
- Barlett, S., Klerman, J., Wilde, P., Olsho, L., Blockin, M., Logan, C., & Enver, A. (2013). Healthy Incentives Pilot (HIP). Retrieved from https://fns-prod.azureedge.net/sites/default/files/HIP_Interim.pdf
- Baker, S. E., Edwards, R., & Doidge, M. (2012). How many qualitative interviews is enough?: Expert voices and early career reflections on sampling and cases in qualitative research. Retrieved from <https://eprints.soton.ac.uk/id/eprint/336913>
- Best Practices in Nutrition Education for Low- Income Audiences. (2015, December 01). Retrieved from <https://snaped.fns.usda.gov/snap/CSUBestPractices.pdf>
- Black, J. L., & Billette, J. (2013). Do Canadians meet Canada's food guide's recommendations for fruits and vegetables? *Applied Physiology, Nutrition & Metabolism, 38*(3), 234-242. doi:10.1139/apnm-2012-0166
- Barnhill, A., & King, K. F. (2013). Evaluating equity critiques in food policy: the case of sugar-sweetened beverages. *The Journal of Law, Medicine & Ethics: A Journal of*

the American Society of Law, Medicine & Ethics, 41(1), 301-309.

doi:10.1111/jlme.12020

Boeing, H., Bechthold, A., Bub, A., Ellinger, S., Haller, D., Kroke, A. ... Watzl, B.

(2012). Critical review: Vegetables and fruit in the prevention of chronic diseases.

European Journal of Nutrition, 51(6), 637-663. doi:10.1007/s00394-012-0380-y

Building a Healthy America: A Profile of the Supplement Nutrition Assistance Program.

(2012). Retrieved from [https://fns-](https://fns-prod.azureedge.net/sites/default/files/BuildingHealthyAmerica.pdf)

[prod.azureedge.net/sites/default/files/BuildingHealthyAmerica.pdf](https://fns-prod.azureedge.net/sites/default/files/BuildingHealthyAmerica.pdf)

Capers, C. F., Baughman, K., & Logue, E. (2011). Behaviors and characteristics of

African American and European American females that impact weight

management. *Journal of Nursing Scholarship*, 43(2), 133-144.

doi:10.1111/j.1547-5069.2011.01393.x

Cates, S., Capogrossi, K., Sallack, L., Deehy, K., Eicheldinger, C., Karns, S., Bradley, S.,

Kosa, K., Brophy, J.(2016). The WIC Nutrition Education Study: Phase 1 Report.

Retrieved from [https://fns-prod.azureedge.net/sites/default/files/ops/WICNutEd-](https://fns-prod.azureedge.net/sites/default/files/ops/WICNutEd-PhaseI.pdf)

[PhaseI.pdf](https://fns-prod.azureedge.net/sites/default/files/ops/WICNutEd-PhaseI.pdf)

Center for Budget Policy Priorities. (n.d.). Retrieved July 20, 2016, from

<http://www.cbpp.org/>

- Cawley, J., & Meyerhoefer, C. (2012). The medical care costs of obesity: An instrumental variables approach. *Journal of Health Economics*, 31(1), 219–230.
<https://doi-org.ezp.waldenulibrary.org/10.1016/j.jhealeco.2011.10.003>
- Coalition on Human Needs. Retrieved March 17, 2015, from <https://www.chn.org/>
- Chiasson, M. A., Findley, S. E., Sekhobo, J. P., Scheinmann, R., Edmunds, L. S., Faly, A. S., & McLeod, N. J. (2013). Changing WIC changes what children eat. *Obesity*, 21(7), 1423-1429. doi:10.1002/oby.20295
- Choose My Plate. (2016, June 01). Retrieved from <http://www.choosemyplate.gov/>
- Chose My Plate Fruit. Retrieved May 5, 2017, from <https://www.choosemyplate.gov/fruit>
- Chose My Plate Vegetables. Retrieved May 5, 2017 from
<https://www.choosemyplate.gov/vegetables>
- Clayton, L. H. (2010). Strategies for selecting effective patient nutrition education materials. *Nutrition in clinical practice*, 25(5), 436-442.
- Colman, S., Nichols-Barrer, I., Redline, J., Devancey, B., & Ansell, S. (2012). Effects of the special supplement nutrition program for women, infants, and children (WIC): A Review of Research. Food and Nutrition Service. Retrieved from <https://fns-prod.azureedge.net/sites/default/files/WICMedicaidLitRev.pdf>
- Compass. (n.d.). Retrieved January 8, 2017, from www.compass.ga.gov
- CHN: House Agriculture Appropriations: Some WIC Funding Restored, but Other Cuts to Nutrition and Housing Programs Stay. (2011). Retrieved March 01, 2017, from

http://www.chn.org/human_needs_report/house-agriculture-appropriations-some-wic-funding-restored-but-other-cuts-to-nutrition-and-housing-programs-stay/#.WM9b6_nyuM8

Congressional Hunger Center. (n.d.). Retrieved July 20, 2016, from

<http://www.hungercenter.org/>

Cowbrough, K. (2004). How dietary measures can help reduce unhealthy blood cholesterol levels. *Prof Nurse*, 20(4), 33-35.

Creswell, J. W. (2013). *Qualitative inquiry and research design: Choosing among five approaches*. Thousand Oaks, CA: Sage Publications, Inc.

Creswell, J. W., & Poth, C. N. (2018). *Qualitative inquiry and research design: choosing among five approaches*. Los Angeles, CA: Sage.

Dannefer, R., Abrami, A., Rapoport, R., Sriphanlop, P., Sacks, R., & Johns, M. (2015). A mixed-methods evaluation of a SNAP-Ed farmers' market-based nutrition education program. *Journal of nutrition education and behavior*, 47(6), 516-525. doi:10.1016/j.jneb.2015.04.153

Dan Ramdath, D., Hilaire, D. G., Cheong, K. D., & Sharma, S. (2011). Dietary intake among adults in Trinidad and Tobago and development of a quantitative food frequency questionnaire to highlight nutrition needs for lifestyle interventions. *International Journal of Food Sciences and Nutrition*, 62(6), 636–641. doi:10.3109/09637486.2011.572545

- Davy, B. M., Zoellner, J. M., Waters, C. N., Bailey, A. N., & Hill, J. L. (2015). Associations among chronic disease status, participation in federal nutrition programs, food insecurity, and sugar-sweetened beverage and water intake among residents of a health-Disparate region. *Journal of nutrition education and behavior*, 47(3), 196-205. doi:10.1016/j.jneb.2015.01.001
- DiClemente, C. C., Delahanty, J. C., Havas, S. W., & Van Orden, O. R. (2015). Understanding self-reported staging of dietary behavior in low-income women. *Journal of Health Psychology*, 20(6), 741–753. doi:10.1177/1359105315580213
- Dietary Guidelines. (2015, January 01). Retrieved from <http://www.choosemyplate.gov/dietary-guidelines.html>
- Dietary Guidelines for Americans 2015-2020. (n.d) Retrieved March 7, 2019, from <https://www.choosemyplate.gov/eathealthy/dietary-guidelines>
- Effects of the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC): A Review of Recent Research. (2012). Retrieved from <https://fns-prod.azureedge.net/sites/default/files/WICMed>
- Food and Nutrition Services United States Department of Agriculture. (2015, July 28). Retrieved from <http://www.fns.usda.gov/ebt/learn-about-snap-benefits-farmers-markets>
- Food and Nutrition Services United States Department of Agriculture. (2017). Retrieved from <https://www.fns.usda.gov/report-finder>

- Food Research & Action Center. (n.d.). Retrieved July 22, 2016, from <http://frac.org/>
- Food Stamps. (2015). Retrieved from <http://dfcs.dhs.georgia.gov/food-stamps>
- Food Typically Purchased by Supplemental Nutrition Assistance Program (SNAP) Households. (2016). Retrieved May 5, 2017, from <https://fns-prod.azureedge.net/sites/default/files/ops/SNAPFoodsTypicallyPurchased.pdf>
- Gabor, V., Cates, S., Gleason, S., Long, V., Clarke, G., Blitein, J., Williams, P., Bell, L, Hersey, J., & Ball. M. (2012). SNAP Education and Evaluation Study (Wave I). Food and Nutrition Service. Retrieved from [http:// https://fns-prod.azureedge.net/sites/default/files/SNAPEdWaveI.pdf](http://https://fns-prod.azureedge.net/sites/default/files/SNAPEdWaveI.pdf)
- Garasky, S., Mbwana, K., Romualdo, A., Tenagiol, A., Roy, M. (2016). Food Typically Purchased by Supplemental Nutrition Assistance Program (SNAP) Households. Retrieved from <https://fns-prod.azureedge.net/sites/default/files/ops/SNAPFoodsTypicallyPurchased.pdf>
- Government Accountability Institute. (2017). Retrieved from <http://www.g-a-i.org/>
- Goldberg, R. L. (2013). No such thing as a free lunch: Paternalism, poverty, and food justice. *Stanford Law & Policy Review*, 24(1), 35-98. Retrieved from <https://heinonline.org/HOL/LandingPage?handle=hein.journals/stanlp24&div=6&id=&page=>
- Greenblatt, Y., Gomez, S., Alleman, G., Rico, K., McDonald, D. A., & Hingle, M. (2016). Optimizing nutrition education in WIC: Findings from focus groups with

Arizona clients and staff. *Journal of Nutrition Education and Behavior*, 48(4), 289-294. e1. doi:10.1016/j.jneb.2016.01.002

Haynes-Maslow, L., Parsons, S. E., Wheeler, S. B., & Leone, L. A. (2013). A qualitative study of perceived barriers to fruit and vegetable consumption among low-income populations, North Carolina, 2011. *Preventing chronic disease*, 10, E34. doi:10.5888/pcd10.120206

Harrison, A., Hwalek, M., Raney, D., & Fritz, J. (1978). Cues to Deception in an Interview Situation. *Social Psychology*, 41(2), 156-161. doi:10.2307/3033575

HealthM Powers. (2016) Retrieved from <http://healthmpowers.org/about-us-3-4/history/>

Healthy Incentives Pilot. (2013) Retrieved from <http://www.fns.usda.gov/hip/healthy-incentives-pilot>

Healthy Incentives Pilot (HIP) Early Implementation Report. (2013). Retrieved

https://fns-prod.azureedge.net/sites/default/files/HIP_Early_Implementation.pdf

Heise TL, Katikireddi SV, Pega F, Gartlehner G, Fenton C, Griebler U, Sommer I, Pfänder M, Lhachimi SK. Taxation of sugar-sweetened beverages for reducing their consumption and preventing obesity or other adverse health outcomes.

Cochrane Database of Systematic Reviews 2016, Issue 8. Art. No.: CD012319.

Hermans, K., Spruytte, N., Cohen, J., Van Audenhove, C., & Declercq, A. (2016).

Usefulness, feasibility and face validity of the interRAI palliative care instrument according to care professionals in nursing homes: A qualitative study.

International Journal of Nursing Studies, 62, 90-99.

doi:10.1016/j.ijnurstu.2016.07.014

- Hoffnagle, E., Willett, W., Leung, C., Nestle, M., Foerster, S., Heung, L., Jensen, H., Lindsay, A., Lofink, H., Hoffman, V. (2012). SNAP to Health: A Fresh Approach to Improving Nutrition in the Supplemental Nutrition Assistance Program. SNAP to Health. Retrieved from <https://www.snapttohealth.org/wp-content/uploads/2012/10/CSPC-SNAP-Report.pdf>
- Hood, C., Martinez-Donate, A., & Meinen, A. (2012). Promoting healthy food consumption: a review of state-level policies to improve access to fruits and vegetables. *WMJ: Official Publication of the State Medical Society of Wisconsin*, 111(6), 283-288. Retrieved from <https://pdfs.semanticscholar.org/a997/a932000bd4d65372e30d7e4008eb563572d0.pdf>
- Household Food Security in the United States 2015. (2017, January 29). Retrieved from <https://www.ers.usda.gov/webdocs/publications/err215/err-215.pdf?v=42636>
- House Republicans want to cut WIC by 10%. (2011). Retrieved from <http://www.cnn.com/2011/POLITICS/02/25/budget.women.children/>
- Isbell, M. G., Seth, J. G., Atwood, R. D., & Ray, T. C. (2014). A client-centered nutrition education model: lessons learned from Texas WIC. *Journal of Nutrition Education and Behavior*, 46(1), 54-61. doi:10.1016/j.jneb.2013.05.002

- Juby, C., & Meyer, E. E. (2011). Child nutrition policies and recommendations. *Journal of Social Work, 11*(4), 375-386. doi:10.1177/1468017310379451
- Just Say Yes (JSY) to Fruits and Vegetables. (2015, July 05). Retrieved from <http://www.jsyfruitveggies.org/>
- Kim, H.-S., Ahn, J., & No, J.-K. (2012). Applying the Health Belief Model to college students' health behavior. *Nutrition Research and Practice, 6*(6), 551–558. doi:10.4162/nrp.2012.6.6.551
- Karakus, M., Milfort., R, MacAllum., K, Hao., H. (2014). Nutrition Assistance in Farmers Markets (FM): Understanding the Shopping Patterns of SNAP Participants. Retrieved from <https://fns-prod.azureedge.net/sites/default/files/FarmersMarkets-Shopping-Patterns.pdf>
- Karanja, D. (2014). Experiential cooking classes for underserved audiences empowers families with skills to make healthy and affordable meals. *Journal of Nutrition Education and Behavior, 46*(4), S113-S114. doi:10.1016/j.jneb.2014.04.049
- Kharofa, R. Y., Meurer, J. R., & Nelson, D. (2014). Perceptions about eating healthy in WIC participants. *Clinical Pediatrics, 53*(4), 403-406. doi:10.1177/0009922813482180
- Knäupper, B., McCollam, A., Rosen-Brown, A., Lacaille, J., Kelso, E., & Roseman, M. (2011). Fruitful plans: Adding targeted mental imagery to implementation

intentions increases fruit consumption. *Psychology & Health*, 26(5), 601-617.

doi:10.1080/08870441003703218

Kosinski, M., Matz, S. C., Gosling, S. D., Popov, V., & Stillwell, D. (2015). Facebook as a research tool for the social sciences: Opportunities, challenges, ethical considerations, and practical guidelines. *American Psychologist*, 70(6), 543–556. <https://doi-org.ezp.waldenulibrary.org/10.1037/a0039210>

Liu, R. H. (2013). Health-promoting components of fruits and vegetables in the diet. *Advances in Nutrition*, 4(3), 384S–392S. doi:10.3945/an.112.003517

Lohse, B., & Wamboldt, P. (2013). Purposive facebook recruitment endows cost-effective nutrition education program evaluation. *JMIR research protocols*, 2(2), e27. doi:10.2196/resprot.2713

Lynch, E. B., Holmes, S., Keim, K., & Koneman, S. A. (2012). Concepts of healthful food among low-income African American women. *Journal of Nutrition Education and Behavior*, 44(2), 154-159. doi:10.1016/j.jneb.2011.04.001

Lynch, M. (2011, December). Vegetables at any cost: How the media markets children's unhealthy food preferences in North America. *Early Childhood Education Journal*, 39(5), 297-302. doi:10.1007/s10643-011-0476-7.

MacKinnon, C., Baker, S., Auld, G., Ammerman, A., Hanula, G., Lohse, B., ... Wardlaw, M. K. (2014). Identification of best practices in nutrition education for low-

income audiences. *Journal of Nutrition Education and Behavior*, 46(4), S152.

doi:10.1016/j.jneb.2014.04.144

MacLellan, D., Morley, C., Traviss, K., & Cividin, T. (2011). Toward evidence-based, client-centred nutrition education guidelines: dietitian and consumer survey results. *Canadian Journal Of Dietetic Practice And Research: A Publication Of Dietitians Of Canada = Revue Canadienne De La Pratique Et De La Recherche En Dietetique: Une Publication Des Dietetistes Du Canada*, 72(3), 111–116.
Retrieved from <https://search-ebshost-com.ezp.waldenulibrary.org/login.aspx?direct=true&db=mnh&AN=21896244&site=eds-live&scope=site>

Marshall, B., Cardon, P., Poddar, A., & Fontenot, R. (2013). Does sample size matter in qualitative research?: A review of qualitative interviews in IS research. *Journal of Computer Information Systems*, 54(1), 11-22.
doi:10.1080/08874417.2013.11645667

Meitinger, K., Braun, M., & Behr, D. (2018). Sequence Matters in Web Probing: the Impact of the Order of Probes on Response Quality, Motivation of Respondents, and Answer Content. *Survey Research Methods*, 12(2), 103-120.
<https://doi.org/10.18148/srm/2018.v12i2.7219>

- Merriam, S. B. (2009). *Qualitative research: A guide to design and implementation*. San Francisco, CA: Jossey-Bass
- McGeary, Kerry Anne, 2013. "The impact of state-level nutrition-education program funding on BMI: Evidence from the behavioral risk factor surveillance system," *Social Science & Medicine*, Elsevier, vol. 82(C), pages 67-78. doi: 10.1016/j.socscimed.2013.01.023
- Moran, R. L. (2011). Consuming Relief: Food Stamps and the New Welfare of the New Deal. *Journal of American History*, 97(4), 1001–1022. <https://doi-org.ezp.waldenulibrary.org/10.1093/jahist/jaq067>
- \$16.8 million in grants aim to help SNAP recipients eat healthier. (2017, August 16). Retrieved from <http://americansecuritynews.com/stories/511178863-16-8-million-in-grants-aim-to-help-snap-recipients-eat-healthier>
- Namdar, B. (2017). Preservice Science Teachers' Collaborative Knowledge Building through Argumentation on Healthy Eating in a Computer Supported Collaborative Learning Environment. *Turkish Online Journal of Educational Technology-TOJET*, 16(3), 132-146.
- Naghashpour, M., Shakerinejad, G., Lourizadeh, M. R., Hajinajaf, S., & Jarvandi, F. (2014). Nutrition education based on health belief model improves dietary calcium intake among female students of junior high schools. *Journal of Health*,

- Population, and Nutrition*, 32(3), 420–429. Retrieved from <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4221448/>
- National Survey of WIC Participant II. (2012). Retrieved from https://fns-prod.azureedge.net/sites/default/files/NSWP-II_Summary.pdf
- Nutrition Assistance.(n.d) Retrieved January 7, 2014, from <https://www.fns.usda.gov/snap/supplemental-nutrition-assistance-program>
- Nutrition Assistance in Farmers Markets: Understanding the Shopping Patterns of SNAP Participants. (2017). Retrieved from <https://fns-prod.azureedge.net/sites/default/files/FarmersMarkets-Shopping-Patterns.pdf>
- Nutrition. (n.d). Retrieved March 01, 205, from <https://www.gaaap.org/nutrition/>
- Ojo O. (2019). Nutrition and Chronic Conditions. *Nutrients*, 11(2), 459. <https://doi.org/10.3390/nu11020459>
- Olympus. (n.d). Retrieved December 01, 2018, from http://www.olympusamerica.com/cpg_section/cpg_support_manuals.asp?id=1701
- Online Directives Information System (ODIS) Manual. (2017). Retrieved from <http://odis.dhs.ga.gov/ChooseCategory.aspx?cid=1035>
- Orji, R., Vassileva, J., & Mandryk, R. (2012). Towards an Effective Health Interventions Design: An Extension of the Health Belief Model. *Online Journal of Public Health Informatics*, 4(3).doi:10.5210/ojphi.v4i3.4321

- Piontak, J. R., & Schulman, M. D. (2014). Food Insecurity in Rural America. *Contexts*, 13(3), 75-77. doi:10.1177/1536504214545766
- Palinkas, L. A., Horwitz, S. M., Green, C. A., Wisdom, J. P., Duan, N., & Hoagwood, K. (2015). Purposeful sampling for qualitative data collection and analysis in mixed method implementation research. *Administration and Policy in Mental Health*, 42(5), 533–544. doi:10.1007/s10488-013-0528-y
- Rasmussen, K., Latuiklippe, M., Yaktine, L. (2015). Review of WIC food packages: An evaluation of white potatoes in the cash value voucher: Letter Report. Retrieved from <https://fns-prod.azureedge.net/sites/default/files/ops/IOMWICFoodPkg-Potatoes.pdf>interventions.
- Rasmussen, K., Latuiklippe, M., Yaktine, L.(2016). Review of WIC Food Packages: Proposed framework for revisions. Retrieved from <https://fns-prod.azureedge.net/sites/default/files/ops/IOMWICFoodPkg-Revisions-InterimReport.pdf>
- Review of WIC Food Packages: An Evaluation of White Potatoes in the Cash Value Voucher: Letter Report. (2015). Retrieved May 1, 2017 <https://fns-prod.azureedge.net/sites/default/files/ops/IOMWICFoodPkg-Potatoes.pdf>
- Sanofer, A. A. (2014). Role of citrus fruits in health. *Journal of Pharmaceutical Sciences and Research*, 6(2), 121.

- Savoie-Roskos, M., Durward, C., Jeweks, M., & LeBlanc, H. (2016). Reducing food insecurity and improving fruit and vegetable intake among farmers' market incentive program Participants. *Journal of Nutrition Education and Behavior*, 48(1), 70-76. doi:10.1016/j.jneb.2015.10.003
- Schnittker, J., & Bacak, V. (2014). The increasing predictive validity of self-rated health. *PLoS ONE*, 9(1), e84933. doi:10.1371/journal.pone.0084933
- Shanthy A. Bowman, Steven L. Gortmaker, Cara B. Ebbeling, Mark A. Pereira, David S.(2004). Ludwig Pediatrics Jan 2004, Effects of Fast-Food Consumption on Energy Intake and Diet Quality Among Children in a National Household Survey. 113 (1) 112-118; DOI: 10.1542/peds.113.1.112
- Simmons, D., & Chapman, G. E. (2012). The significance of home cooking within families. *British Food Journal*.
- Singh, A. (2013). Effect of dietary pattern on coronary heart disease (CHD) patients. *Biomedical Research* (0970-938X), 24(3), 324-327. Retrieved from [https://web.a.ebscohost.com/abstract?direct=true&profile=ehost&scope=site&authtype=crawler&jrnl=0970938X&AN=96971735&h=FaAzP4i4wirUgxm3DhgAsQk%2fCYZGhVxx%2bHNNLwpkpEqxxyrDYuQL2kdBpEgU%2fJyf8LWg%2fzmVyJun%2fCZU2IPPZg%3d%3d&crl=c&resultNs=AdminWebAuth&resultLocal=ErrCrlNotAuth&crlhashurl=login.asp%3fdirect%3dtrue%26profile%3dehost%](https://web.a.ebscohost.com/abstract?direct=true&profile=ehost&scope=site&authtype=crawler&jrnl=0970938X&AN=96971735&h=FaAzP4i4wirUgxm3DhgAsQk%2fCYZGhVxx%2bHNNLwpkpEqxxyrDYuQL2kdBpEgU%2fJyf8LWg%2fzmVyJun%2fCZU2IPPZg%3d%3d&crl=c&resultNs=AdminWebAuth&resultLocal=ErrCrlNotAuth&crlhashurl=login.asp%3fdirect%3dtrue%26profile%3dehost%3d)

26scope%3dsite%26authtype%3dcrawler%26jrnl%3d0970938X%26AN%3d9697
1735

SNAP Education. Retrieved March 1, 2019, from <https://www.fcs.uga.edu/extension/uga-snap-ed-our-services>

Supplemental Nutrition Assistance Program State Activity Report Fiscal Year 2015.

(2015). Retrieved March 20, 2017, from [https://fns-](https://fns-prod.azureedge.net/sites/default/files/snap/2015-State-Activity-Report.pdf)

[prod.azureedge.net/sites/default/files/snap/2015-State-Activity-Report.pdf](https://fns-prod.azureedge.net/sites/default/files/snap/2015-State-Activity-Report.pdf)

Supplemental Nutrition Assistance Program (SNAP) Research. (2016). Retrieved from

<https://www.fns.usda.gov/ops/supplemental-nutrition-assistance-program-snap-research>

Sundberg, F., Augustsson, M., Forsander, G., Cederholm, U., & Axelsen, M. (2014).

Children under the age of seven with diabetes are increasing their cardiovascular risk by their food choices. *Acta Paediatrica*, *103*(4), 404-410.

doi:10.1111/apa.12533

Surveillance of Fruit and Vegetable Intake Using the Behavioral Risk Factor Surveillance

System Retrieved from http://www.cdc.gov/brfss/pdf/fruits_vegetables.pdf

SNAP Education and Education Evaluation Study (Wave I). (2012). Retrieved from

https://fns-prod.azureedge.net/sites/default/files/SNAPedWaveI_0.pdf

Tavassoli, E., Ramezankhani, A., Mirmiran, P., Mehrabi, Y., & Asghar, A. H. (2015).

Knowledge and perceptions of obesity prevention and consumption of fruits and

- vegetables among high school girl students in shahr-e-kord. *British Journal of Medicine and Medical Research*, 6(2), 200-211. doi:10.9734/bjmmr/2015/12716
- Tobey, L. N., Schrumpf, E., Johnson, T., Mouzong, C., Veith, R. M., Braverman, M. T. & Manore, M. M. (2017). Can healthy recipes change eating behaviors? The Food Hero social marketing campaign recipe project experience and evaluation. *Journal of nutrition education and behavior*, 49(1), 79-82.
- Valli, C., Rabassa, M., Johnston, B. C., Kuijpers, R., Prokop-Dorner, A. ... Alonso-Coello, P. (2019). Health-Related Values and Preferences Regarding Meat Consumption: A Mixed-Methods Systematic Review. *Annals of Internal Medicine*, 171(10), 742.
- Von Ruesten, A., Feller, S., Bergmann, M. M., & Boeing, H. (2013). Diet and risk of chronic diseases: Results from the first 8 years of follow-up in the EPIC-potsdam study. *European Journal of Clinical Nutrition*, 67(4), 412-9. doi: 10.1038/ejcn.2013.7
- Wahlich, C., Gardner, B., & McGowan, L. (2013). How, when and why do young women use nutrition information on food labels? A qualitative analysis. *Psychology & Health*, 28(2), 202-216. doi:10.1080/08870446.2012.716439
- Wahowiak, L. The Nation's Health August 2015 vol. 45 no. 6 1-10
Retrieved from <http://thenationshealth.aphapublications.org/content/45/6/1.3.full>

- Walker, R. E., Fryer, C. S., Butler, J., Keane, C. R., Kriska, A., & Burke, J. G. (2011). Factors influencing food buying practices in residents of a low-income food desert and a low-income food oasis. *Journal of Mixed Methods Research, 5*(3), 247–267. doi:10.1177/1558689811412971
- Walsh, E., & Kiviniemi, M. (2014). Changing how I feel about the food: experimentally manipulated affective associations with fruits change fruit choice behaviors. *Journal of Behavioral Medicine, 37*(2), 322-331. doi:10.1007/s10865-012-9490-5
- Wang, S., Meckling, K. A., Marcone, M. F., Kakuda, Y., & Tsao, R. (2011). Can phytochemical antioxidant rich foods act as anti-cancer agents?. *Food Research International, 44*(9), 2545-2554.
- Weatherspoon, D., Oehmke, J., Dembele, A., & Weatherspoon, L. (2014). Fresh vegetable demand behaviour in an urban food desert. *Urban Studies, 52*(5), 960–979. doi:10.1177/0042098014529340
- Weedn, A. E., Ang, S. C., Zeman, C. L., & Darden, P. M. (2012). Obesity prevalence in low-income preschool children in Oklahoma. *Clinical Pediatrics, 51*(10), 917-922. doi:10.1177/0009922812441861
- Weinstein, E., Galindo, R. J., Fried, M., Rucker, L., & Davis, N. J. (2013). Impact of a focused nutrition educational intervention coupled with improved access to fresh produce on purchasing behavior and consumption of fruits and vegetables in

overweight patients with diabetes mellitus. *The Diabetes Educator*, 40(1), 100–106. doi:10.1177/0145721713508823

WIC Program Overview and History. (n.d). Retrieved March 03, 2014, from <https://www.nwica.org/overview-and-history>

Wyker, B. A., Jordan, P., & Quigley, D. L. (2012). Evaluation of Supplemental Nutrition Assistance Program Education: Application of Behavioral Theory and Survey Validation. *Journal of Nutrition Education and Behavior*, 44(4), 360–364. <https://doi-org.ezp.waldenulibrary.org/10.1016/j.jneb.2011.11.004>

Yaktine, A. L., & Murphy, S. P. (2013). Aligning nutrition assistance programs with the Dietary Guidelines for Americans. *Nutrition Reviews*, 71(9), 622-630. doi:10.1111/nure.12046

Zachary, D. A., Palmer, A. M., Beckham, S. W., & Surkan, P. J. (2013). A framework for understanding grocery purchasing in a low-income urban environment. *Qualitative Health Research*, 23(5), 665–678. doi:10.1177/1049732313479451

Zamawe, F. C. (2015). The implication of using NVivo software in qualitative data analysis: Evidence-based reflections. *Malawi Medical Journal*, 27(1), 13. doi:10.4314/mmj.v27i1.4

Appendix A: Letter to Albany Beauty Academy, LLC Requesting Permission

Takenya Jordan
Albany Beauty Academy, LLC
2231 Dawson Rd.
Albany, GA 31707
(229) 496-1640

October 02, 2017

Dear Mrs. Jordan:

My name is Latasha Reddick and I am a doctoral student at Walden University. I am conducting a study about the importance of fruits and vegetables amongst SNAP recipients. I would like to request permission to invite female and male SNAP participants ages 18 or older from the Albany Beauty Academy, LLC to participate in the study.

If you have any questions about the study please feel free to contact me at 229-888-7037 or latasha.reddick@waldenu.edu.

I would like to request a letter indicating your agreement to allow recruitment for my study.

Cordially,

Latasha Reddick
1707 Lovelace Ave.
Albany Georgia 31701
(229)888-7037

Appendix B: Letter of Cooperation from Albany Beauty Academy, LLC

Takeya Jordan
Owner
Albany Beauty Academy, LLC
2231 Dawson Road
Albany, GA 31707
(229) 496-1640

Dear Ms. Reddick:

I, Takeya Jordan permit Latasha Reddick (Walden University doctoral student) permission to invite Albany Beauty Academy LLC students to participate in a research study. Student participation will not impact the services they receive or provide at Albany Beauty Academy, LLC.

I am also granting Latasha Reddick access to a private room at Albany Beauty Academy, LLC during non-academic times in order for her to conduct audio reordereed interviews with the students. |

Sincerely,



Takeya Jordan
Owner

Appendix C: Invitation to participate in research Advertisement

Hello,

My name is Latasha Reddick. I am a doctoral student at Walden University. I am conducting a study about the importance of fruits and vegetables amongst SNAP recipients. Keep in mind that you do not have to answer any question you wish not to answer. To be a participant in this study you need to answer “yes” to the five questions below:

- 1) I speak and write in English?
- 2) I live in Albany Georgia?
- 3) I am 18 years or older?
- 4) I receive food stamps or SNAP benefits?

The interview location for participants will take place in a private room at Albany Beauty Academy, LLC during non-academic times. The interview sessions will be about 30 minutes. The interviews will be open-ended questions about the importance of fruits and vegetables. The transcript of the interviews will be shared with participants in order to ensure the transcript is accurate. The transcript review will take place in the same private room that the interviews will be conducted during non-academic hours. The results will be shared in lay language. A 1-2-page summary in lay language will be shared with the participants after the study is completed and the researcher (Latasha Reddick) degree has

been conferred. Sharing the results will also take place in the same private room that the interviews will be conducted during non-academic hours.

For your time you will receive a Publix Super Market \$5 gift card.

Remember you can stop participating in the study at any time and your participation is strictly voluntary. If you have any questions or concerns about this study please contact me at the telephone number listed below.

Thank you for your time.

Latasha Reddick

(229) 888-7037

Appendix D: SNAP Prescreening Questionnaire

This pre-screening questionnaire is being conducted by a researcher named Latasha Reddick who is a doctoral student at Walden University. Understand that as a volunteer participating in this study you do not have to answer any questions due to any reason. However, by not answering a question below will exclude you from being eligible to participate in this study.

SNAP Recipients Pre-Screening Research Participant Form

Date: _____ Time: _____

Are you 18 years or older () Yes () No

Can you speak and write in English? () Yes () No

Do you receive SNAP benefits? () Yes () No

Do you live in Albany Georgia? () Yes () No

Signed and understand the consent form? () Yes () No

Appendix E: Interview Protocol

PURPOSE: The purpose of this script is to interview the participants.

WHO USES IT: Interviewer (Latasha Reddick)

CONSTRUCTION: This script will be accessible by means of PDF or MS Word on 8 ½” by 11” white paper.

Hello, my name is Latasha Reddick. I am a doctoral student at Walden University. I am conducting a study about the importance of fruits and vegetables amongst SNAP recipients.

Please feel free to ask any questions.

Thank you for your time.

[Interviewer] Thanks for agreeing to be interviewed for the research project called, “Assessing the Perceptions of the Importance of Fruits & Vegetables amongst Supplemental Nutrition Assistance Program (SNAP) Recipients “. This interview will be recorded and transcribed for analysis purposes.

[Interviewer] Your participation in this research study is total voluntary. You can avoid questions you do not want to answer, and you can stop the interview at any time. The interview will take about 30 minutes and will be recorded. You will not be individually identified in any reports or publications that may come from this study. Any personal data about you that is collected will stay confidential. If you have any questions about this study feel free to ask.

Do you have any questions or concerns you would like to address before we begin? If not, I will now continue to the survey questions.

[Interviewer] First I would like to ask you seven demographic questions.

GO TO NEXT PAGE →

[Interviewer] First I would like to ask you seven demographic questions.

Demographic Questions

1. What is your age?

2. What is your sex? Male, Female, other

3. What is your race?

4. What is your marital status? Are you single, married, divorced, domestic
partnership, or other?

5. What is your education level?

--

6. How many children are in your household under age 18?

--

7. Who many years/months have you been in the SNAP program?

--

Interview Questions:

8. Why do you eat fruits and vegetables?

GO TO NEXT PAGE →

9. How can information on eating healthy help you and your family?

10. What does eating healthy mean to you?

11. Do you feel that the local SNAP office does a good job providing nutrition education?

GO TO NEXT PAGE →

12. How do you make sure you eat eating fruits and vegetables?

13. What kinds of food do you eat daily?

14. Tell me about some types of foods that can make you sick with disease?

GO TO NEXT PAGE →

15. Does cost or other money related things keep you from eating fruits and vegetables?

16. How does your local SNAP office offer nutrition education to you: paper copy, email, text, video, or not sure?

Appendix F: Confidentiality Agreement from TranscribeMe, Inc

Name of Signer: TranscribeMe, Inc Sales Manager Tammy Farrar

During the course of my activity in collecting data for this research: “Latasha Shanelle Reddick” I will have access to information, which is confidential and should not be disclosed. I acknowledge that the information must remain confidential, and that improper disclosure of confidential information can be damaging to the participant.

By signing this Confidentiality Agreement I acknowledge and agree that:

1. I will not disclose or discuss any confidential information with others, including friends or family.
2. I will not in any way divulge, copy, release, sell, loan, alter or destroy any confidential information except as properly authorized.
3. I will not discuss confidential information where others can overhear the conversation. I understand that it is not acceptable to discuss confidential information even if the participant’s name is not used.
4. I will not make any unauthorized transmissions, inquiries, modification or purging of confidential information.

I agree that my obligations under this agreement will continue after termination of the job that I will perform.

I understand that violation of this agreement will have legal implications.

I will only access or use systems or devices I’m officially authorized to access and I will not demonstrate the operation or function of systems or devices to unauthorized

individuals. Signing this document, I acknowledge that I have read the agreement and I agree to comply with all the terms and conditions stated above.

Signature *Tammy Farrar* **Date: 03/23/2018**

Appendix G: Summary Handout

Assessing the Perceptions of the Importance of Fruits & Vegetables amongst Supplemental Nutrition Assistance Program (SNAP) Recipients
Latasha Shanelle Reddick
Walden University

Summary Findings

Participant Summary Table

Age Mean	Race	Sex	Marital Status
22 years old	1% Caucasian (n=1) 89% black (n=17) 10% bi-racial (n=2)	15% male (n=3) 85% female (n=17)	15% divorced (n=3) 25% married (n=5) 60% single (n=12)

Background

The following is a summary of the study findings. As a recap I am conducting a study about the importance of fruits and vegetables amongst SNAP recipients.



Methods

The study had (27) interview questions. Each participants received a \$5 Publix gift card.

The overall results of the study revealed that the local SNAP office is doing a good job at providing nutrition education.

Findings

The participants stated during the study that it is important to eat fruits and vegetables but they prefer foods they are familiar with. For example, (15) out of (20) participants that were interviewed stated that the nutrition education material should be provided via paper copies.

The interviewees understood that it is important to eat fruits and vegetables daily in order to decrease their chances of being affected by chronic diseases that are related to food. The participants stated in the interviews that the nutrition education the SNAP office provides is helpful and beneficial. The participants also stated the paper copy of nutritional education is the most preferred.

Recommendations

Paper copy is the current formation the local SNAP office is using to deliver nutrition education. This study confirmed that the participants preferred the paper copy nutrition education.

Walden University, Ph.D of Health Education Advocacy
Doctoral Student:
Latasha Shanelle Reddick
June 2019

Appendix I: Memorandum to Director

Memorandum

From: Latasha Reddick
To: Pamela Lofton (Director of Albany Georgia Family and Children Services)
Subject: Sharing Results
Date: November 11, 2019

Introduction to the study: The purpose of the study is to evaluate the viewpoints that SNAP recipients have towards fruits and vegetables. This study allowed SNAP recipients to share their perceptions about SNAP nutrition education and the importance of fruit and vegetables.

Methodology: To understand the SNAP recipients' behaviors, the health belief model (HBM) was the foundation in this study. The HBM is used in health behavior research settings to address behaviors that cause health issues. The HBM states that health-related behavior is driven by a person's perception of the benefits and barriers related to health-related diseases. The HBM is also a prevalent theory amongst health education and promotion research. The study implemented a qualitative approach, and interviews were conducted with SNAP recipients. This study focused on the perceptions of fruits and vegetables amongst SNAP recipients that reside in Albany Georgia. Interviews were conducted with SNAP recipients to obtain their viewpoints to fruits and vegetables.

SNAP Policy Recommendation:

1. Nonprofit organizations, grocery stores, and supermarkets should be funded to support SNAP education by means of funding via the USDA.
2. A proactive measure such as eliminating added refined sugar from SNAP purchases and limiting the amount of meats that can be purchased with SNAP benefits will help the recipients to maintain a healthy daily fruit and vegetable intake.

