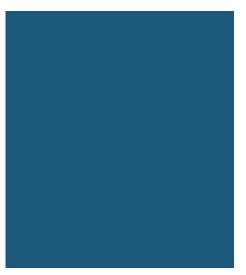


New Jersey SNAP-Ed Needs Assessment

August 2017

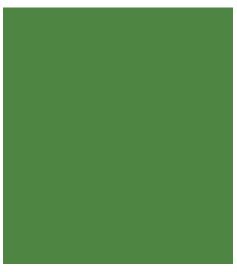












Final Version: August 2017

The following individuals contributed to this report:

Eden N. Kyse, Ph.D., Director, CREEHS

Erin M. Bunger, MPH, Senior Research Associate

Lina M. Acosta, MPH, Research Associate

Paige Frenkel, MA, Research Assistant, CREEHS

Theresa Cannone, BA, Graduate Research Assistant, CREEHS

Meghan Gosselink, BA, Graduate Research Assistant, CREEHS

About CREEHS:

The <u>Center for Research and Evaluation on Education and Human Services (CREEHS)</u> is an independent University-based research and evaluation center housed within the College of Education and Human Services at Montclair State University. CREEHS conducts objective multi-disciplinary and multi-method applied research and evaluation to enhance program planning and outcomes in education, health, and human services; provides high quality evaluation training and education; and advances evaluation Science by bridging the expertise of researchers and practitioners. The Center provides services for school districts, institutions of higher education, government agencies, community-based organizations, and foundations to help them meet accountability and program improvement needs.

Contact CREEHS:

Center for Research and Evaluation on Education and Human Services (CREEHS) Montclair State University
University Hall, Suite 3124
One Normal Avenue
Montclair, New Jersey 07043
Tel. (973) 655-4247

Email: evalcenter@montclair.edu

Website: www.montclair.edu/cehs/creehs

Acknowledgements

The authors wish to acknowledge the following individuals for their guidance and/or contributions:

- Staff from the New Jersey Department of Human Services, including Andrea Breitwieser and Larry Braasch
- Staff from New Jersey Department of Health, including Juliet Jones, Colette Lamothe-Galette and Lisa Asare
- Participants of the key informant interviews
- CREEHS staff, including Program Assistant Tina Seaboch and Graduate Research Assistant Gabriela Gutierrez

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EXECUTIVE SUMMARY

The Supplemental Nutrition Assistance Program Education (SNAP-Ed) is a program of the United States Department of Agriculture (USDA), Food and Nutrition Services. SNAP-Ed is designed to improve the likelihood that persons eligible for SNAP will make healthy food choices within a limited budget and choose physically active lifestyles consistent with the current 2015-2020 Dietary Guidelines for Americans and the USDA food guidance.

The New Jersey Department of Human Services, through the New Jersey Department of Health, commissioned the Center for Research and Evaluation on Education and Human Services (CREEHS) at Montclair State University to conduct a needs assessment for the New Jersey SNAP-Ed program. The purpose of the assessment was to identify nutrition, physical activity, and obesity prevention needs, as well as barriers to accessing healthy foods and physical activity.

Methods

In March 2017, CREEHS compiled and assessed data from publicly available sources to generate a profile of New Jersey residents eligible for SNAP-Ed, areas of highest risk, need for health promotion prevention and existing programs related to nutrition. These data were collected from several databases (federal and state), registries, national surveys, reports and other records. Additionally, CREEHS conducted interviews with a sample of five key informants. The interviews gathered information about experiences and insights about the services available for families who are eligible for the SNAP program in New Jersey.

Key Findings

Demographic Characteristics

- 9% of New Jersey residents participate in SNAP, representing 60% of those eligible for SNAP benefits
- Burlington, Salem and Gloucester counties reported the greatest decline in SNAP caseloads from 2016 to 2017
- Southern counties and northeastern urban counties have greater socio-economic needs, higher Black and Hispanic populations and greater percentages of residents whose primary language is other than English than do other counties
- Cape May and Ocean counties have the largest percentage of adults aged 65 years and older among all New Jersey counties

Diet-Related Health Statistics

- Some New Jersey residents more frequently report being obese and physically inactive and less frequently report consuming fruits and vegetables
 - o Adults identifying as Black/African American or Hispanic, or with household incomes less than \$50,000 per year
 - o High school students identifying as Black/African American or Hispanic
 - Residents in southern counties
- Rates of chronic conditions (i.e., coronary heart disease, diabetes, cancer) are generally highest among residents who live in southern and urban northeastern counties than other counties
- Less than half of New Jersey schools incorporate locally grown foods, have school gardens and have physical activity breaks in the classroom during the day
- Atlantic, Camden, Cape May, Cumberland, Essex, Gloucester, Ocean and Salem counties have limited food environments
- ➤ SNAP redemptions per store decreased or only slightly increased in Cape May, Hunterdon, Ocean and Salem counties (2008-2012)

Diet-Related Programs and Services

- > 80 diet-related programs and services exist in New Jersey
- The majority of existing programs are efforts that use community and public health approaches
- Existing programs and services serve low-income New Jersey residents across the lifespan

Underserved or Limited Access Areas

- In southern New Jersey, Atlantic, Camden, Cumberland, Gloucester and Salem counties have large proportions of the population that are obese, physically inactive, low-income and have limited access to healthy foods and physical activity opportunity; however SNAP reach has decreased in these areas
- In northeastern urban New Jersey, Essex and Passaic counties have large proportions of the population that are obese, low-income and have limited access to healthy foods
- Cape May and Ocean counties have the largest percentage of older adults among all New Jersey counties and have large proportions of the population that are obese, lowincome and have limited access to healthy foods

INTRODUCTION

The Supplemental Nutrition Assistance Program Education (SNAP-Ed) is a program of the United States Department of Agriculture (USDA), Food and Nutrition Services. SNAP-Ed is designed to improve the likelihood that persons eligible for SNAP will make healthy food choices within a limited budget and choose physically active lifestyles consistent with the current 2015-2020 Dietary Guidelines for Americans and the USDA food guidance (1).

As part of the federal SNAP-Ed program, state agencies are required to develop a plan that 1) outlines the needs and assets of high risk, low-income populations in the state and 2) identifies and plans evidence-based nutrition education and obesity prevention interventions that address identified needs. The plan is intended to drive the work of the state's SNAP-Ed programming for the next year.

This report summarizes data compiled and collected as part of a New Jersey SNAP-Ed needs assessment. The purpose of the needs assessment is to identify nutrition, physical activity, and obesity prevention needs, as well as barriers to accessing healthy foods and physical activity and existing programs in New Jersey. The assessment is intended to inform the New Jersey SNAP-Ed state plan and future programming. It reflects a comprehensive analysis of the nutrition-related health and quality of life indicators of the SNAP-eligible target population in New Jersey.

METHODOLOGY

The New Jersey Department of Human Services, through the New Jersey Department of Health, commissioned the Center for Research and Evaluation on Education and Human Services (CREEHS) at Montclair State University to conduct a needs assessment for the New Jersey SNAP-Ed program. The assessment considers four questions.

- What are the socio-demographic, health and environmental needs of New Jersey's highest risk populations?
- What are the barriers to accessing healthy foods and physical activity?
- What existing programs and services exist for low-income populations in New Jersey?
- Who is eligible for SNAP-Ed and who is participating?

Data from publicly available sources and key informant interviews were compiled and collected to address the needs assessment questions. Based on USDA guidance, findings are organized by demographic characteristics of the SNAP target population, diet-related health statistics, diet-related programs and services, underserved or limited access areas and recommendations.

Existing Sources of Data

CREEHS compiled and assessed data from a range of publicly available sources to generate a profile of New Jersey residents eligible for SNAP-Ed, areas of highest risk, need for health promotion and disease prevention, and existing programs and services related to nutrition. These data were collected from several databases (federal and state), registries, national surveys, reports and other records. Examples of the key data sources used for this needs assessment are presented below (Table 1). A list of all data sources is included in the References. All data were compiled during March 2017.

Table 1. Data compiled from state, federal and non-governmental sources

State Level Data Sources	Timeframe
New Jersey State Health Assessment Data (NJSHAD)	2009-2015
State of New Jersey Department of Human Services, Division of Family	2016
Development	
Federal Data Sources	Timeframe
United States Census Bureau, American Factfinder	2011-2015
Centers for Disease Control and Prevention, Nutrition, Physical Activity and Obesity Data, Trends and Maps	2013-2015
Centers for Disease Control and Prevention Cancer Rates by State	2013
Centers for Disease Control and Prevention, Diabetes Rates by County	2015
USDA Economic Research Service, Food Environment Atlas	2010-2012
Non-Governmental Data Sources	Timeframe
County Health Rankings and Roadmaps	2017
National Survey of Children's Health	2011-2012
Community Commons Food Desert Census Tracts	2015
Feeding America, Map the Meal Gap 2016,	2014
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New Sources of Data

In addition to the data collected from existing sources, CREEHS conducted interviews with a sample of five key informants. The interviews gathered information about experiences and insights about the services available for families who are eligible for the SNAP-Ed program in New Jersey.

CREEHS also developed an inventory of statewide programs and services related to healthy eating, physical activity and obesity prevention. Key informant interviews provided a list of statewide programs. Using this list, CREEHS staff reviewed program information available online, searched for related programs on each program website, for related partners and their efforts. Although not exhaustive, the inventory provides a list of programs for which information was readily available through internet sources.

Strengths and Limitations

The data compiled and collected for this needs assessment provide a comprehensive view of the socio-demographic, health and environmental status of New Jersey's SNAP-eligible population. The data included are compiled primarily from publicly available sources. The needs assessment used federal and state databases as sources of valid and reliable information. Non-governmental databases were used to enhance the data compiled, filling gaps in publicly available governmental data, and were selected based on their data validity and reliability.

A key strength of this assessment is the use of data indicators that are standard across states and counties, allowing comparisons to be drawn. Another strength is that the needs assessment collected new qualitative information to inform the data compiled from publicly available sources.

A key limitation of this assessment is that the quantitative data included is based only on that which was available through public online sources during March 2017. Data collected through surveillance or other research projects that were not publicly available are not included and thus, there may be gaps in the information. In addition, it is important to note that there is variability between and within counties such that specific neighborhoods within county municipalities may look very different from the county average. The number of interviews conducted and the diversity of employment positions were limited and there may be perspectives that were not captured in these interviews. Five key informants participated and all were government employees. This was a limitation of the timeline for the assessment. Finally, the list of existing diet-related programs and services is not exhaustive and is based on programs that had information available online. As a result, there may be programs not included in this list.

DEMOGRAPHIC CHARACTERISTICS OF THE SNAP TARGET POPULATION

Key Findings

- > 9% of New Jersey residents participate in SNAP, representing 60% of those eligible for SNAP benefits
- Burlington, Salem and Gloucester counties reported the greatest decline in SNAP caseloads from 2016 to 2017
- > Southern counties and northeastern urban counties have greater socio-economic needs, higher Black and Hispanic populations and greater percentages of residents whose primary language is other than English than do other counties
- Cape May and Ocean counties have the largest percentage of adults aged 65 years and older among all New Jersey counties

As of 2016, the U.S. Census estimated that more than 8.9 million individuals reside in New Jersey's 21 counties, comprised of 565 municipalities (Figure 1) (2). One of the most densely populated states in the country, there are approximately 1,200 New Jersey residents per square mile (3).

The population is higher in the northeastern and central regions of the state, with the most populated counties as Bergen (939,200) and Middlesex (837,100) (2). Hudson County is the most densely populated county with 14,700 residents per square mile (3). The least populated counties, including Salem (63,400) and Cape May (94,400), are located in the southern region (2). Salem County is also the least dense county in the state, with 191 residents per square mile (3).

While much of New Jersey is urban and suburban, there are 33 census tracts federally classified as rural areas. These areas

Figure 1. New Jersey's 21 counties

Sussex

Passaic

Bergen

Hunterdon

Somerset

Mercer

Monmouth

Gloucester

Cappe
May

Atlantic

Cappe
May

are located in Atlantic, Burlington, Cumberland, Monmouth and Ocean Counties (4)1.

It is important to note that while available data are presented at the county level, there is variation within each individual county. Due to this diverse within-county composition, there may be specific areas of need within each county that are not represented.

SNAP Participants

According to the U.S. Census, an average of nine percent of New Jersey households participate in SNAP, representing 60% of those eligible for SNAP services (2011-2015). Moreover, there are clusters of SNAP-eligible households in more than half of New Jersey's 21 counties, specifically northeastern urban and southern counties (Figure 2). These clusters are defined as census tracts where 50% or more of the population is at or below 185% of the poverty level (5).

Passaic (18%), Cumberland (17%), Essex (16%), Hudson (15%), Atlantic (14%), Camden (13%), and Salem (12%) counties have SNAP participation rates that exceed the state average (Figure 3) (5).

Figure 2. Northeastern urban and southern counties have clusters of the SNAP eligible population



¹ Although Salem County is the least populated, no census tract in the county received a rural-urban commuting area (RUCA) code of 4-10 by the Federal Office of Rural Health Policy. It is important to note that one census tract in Salem County has no residents.

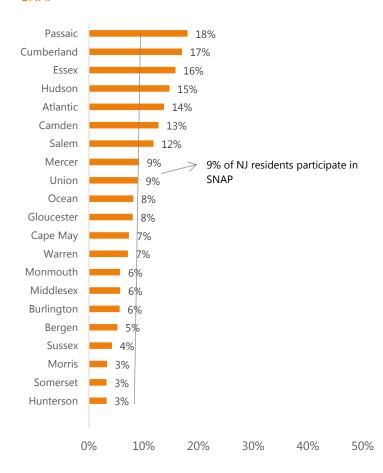
- As of January 2017, 409,002
 New Jersey households received SNAP benefits, an 8% decrease (or 34,301 households) over the previous year (since January 2016) (6).
- As of January 2017, 816,126
 persons received SNAP benefits,
 a 7% decrease over the previous
 year (since January 2016) (6).
- Burlington (-16%), Salem

 (-15%) and Gloucester (-12%)
 counties reported the greatest
 decline in caseload from 2016 to

 2017 (January 2016 through

 January 2017) (6).
- Bergen (+3%), Middlesex (+3%), and Passaic (4%) counties reported the greatest increase in households participating in SNAP from 2016 to 2017 (January 2016 through January 2017) (6).

Figure 3. Northeastern urban and southern counties have the highest percentages of residents that participate in SNAP



Income and Employment

New Jersey is also diverse in terms of household income. According to the U.S. Census, 36% of New Jersey households earn a median household income of less than \$50,000 per year and 25% earn less than \$35,000 per year (7). Further, more than 10% of New Jersey residents (11%), 16% of residents younger than 18 years and 8% of residents aged 65 years and older, are in poverty (8).

- Of those individuals living in poverty, 20% are Hispanic, 19% Black/African American, 7% Asian and 6% White, as of 2015 (9).
- New Jersey SNAP recipients have a median household income of \$20,300 and 52% of recipients live at or above the poverty level with, according to the U.S. Census Bureau (2011-2015) (5).

Median household income and poverty rates vary by county. Five counties have notably lower income and higher poverty rates: Atlantic, Cumberland, Essex, Hudson and Passaic (Figures 4 and 5) (8).

Figure 4. Atlantic, Cumberland, Essex, Hudson and Passaic counties exceed the state rate for low median household income

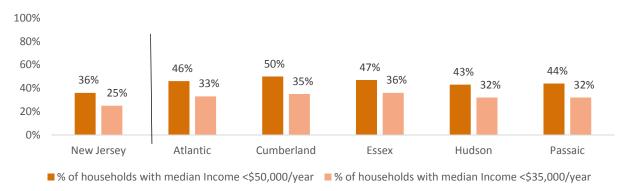
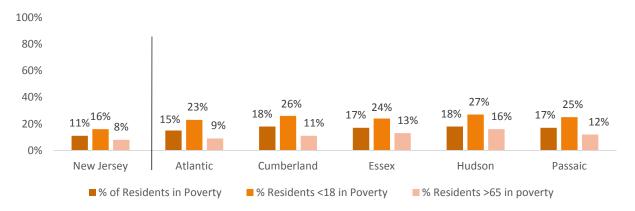


Figure 5. Atlantic, Cumberland, Essex, Hudson and Passaic counties exceed the state rate for poverty



As of 2015, 26% of New Jersey residents live on the edge of poverty (i.e., asset limited, income constrained and employed, or ALICE) (10).

- Cumberland (43%), Salem (33%), Camden (32%), Passaic (31%) and Ocean (30%) counties have the highest percentages of ALICE populations among New Jersey counties (10).
- 46% of families receiving SNAP benefits have one worker in the family (5).

On average, New Jersey's rate of unemployment is 9%, based on the U.S. Census Bureau. This varies by county as well as race and ethnicity (11).

- Essex (13%), Atlantic (13%), Cumberland (11%) and Salem (11%) counties have the highest unemployment rates among New Jersey counties.
- Black/African Americans (15%) and Hispanic (10%) residents more frequently report being unemployed than did White (8%) and Asian (6%) residents.

Race/Ethnicity

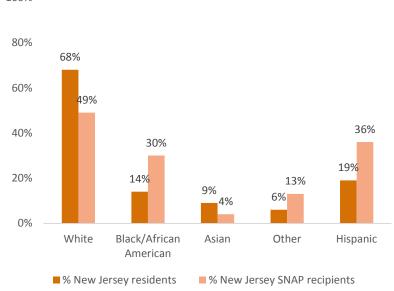
The U.S. Census Bureau estimates that of New Jersey residents, 68% are White, 14% Black/African American, 9% Asian, 6% Other and 3% identify as two or more races (12). Nearly one in five (19%) of New Jersey residents identify as Hispanic/Latino.

Among participating New Jersey SNAP households (Figure 6) (5):

49% are White

- 100%
- 30% are Black/African American
- 4% are Asian
- 13% are another race
- 36% are Hispanic

Figure 6. New Jersey SNAP recipients are disproportionately Black/African American and Hispanic



Racial and ethnic composition also varies by county. Of note (12):

- The percentage of Asian residents in the county exceeds that of the state in Middlesex (23%) and Somerset (16%) counties.
- The percentage of Black/African American residents in the county exceeds that of the state in Essex (40%), Union (21%), Cumberland (21%) and Mercer (20%) counties.
- The percentage of residents who identify as Hispanic or Latino in the county exceeds that of the state in Hudson (43%), Passaic (39%), Union (29%) and Cumberland (29%) counties.

According to the U.S. Census Bureau, among New Jersey residents (13):

- 2% of US Born Citizens in New Jersey participated in SNAP.
- 5% of naturalized citizens in New Jersey participated in SNAP.
- Less than 1% of refugees in New Jersey participated in SNAP.
- 4% of other noncitizens in New Jersey participated in SNAP.

Age

The U.S. Census Bureau estimates that 23% of New Jersey residents are younger than 18 years and 14% are 65 years or older. While population rates of children and adolescents are similar across counties, those of older adults vary by county (12).

- Cape May (23%) and Ocean (22%) counties have the largest percentages of older adults among the 21 counties.
- Hudson (11%) and Essex (12%) counties have the smallest percentages of older adults among the 21 counties.

Gender

On average, 49% of New Jersey's population is male and 51% is female (2011-2015) (12).

• Cumberland County is the only county in the state in which male residents (52%) outnumber female residents (49%).

Family Composition

The average household size in New Jersey is 2.7, while the average family size is 3.3. Among all counties, Passaic County has the highest average household size (3.1) and the highest average family size (3.7) (14).

Among New Jersey households receiving SNAP (5):

- 53% have children under the age of 18 and 30% of these households were headed by single females.
- 39% are headed by a single female.
- 34% have one or more people 60 years.

Education

According to the U.S. Census Bureau, 5% of New Jersey residents aged 25 years and older have less than a high school education, 29% have a high school diploma or the equivalent and 23% have a Bachelor's degree (15).

Similar to other socio-demographic factors, these rates vary by county.

• Cumberland (10%), Hudson (10%), Passaic (10%), and Union (8%) counties have percentages that exceed that of the state of residents who have less than a high school education.

Primary Language

On average, 31% of New Jersey residents speak a language other than English. In every county, except for Hudson, English is the primary language spoken for the majority of the population. In Hudson County, 59% of the population's primary language is a language other than English. This includes Spanish, Indo-European, Asian and Pacific Island and other languages (16).

• Passaic (48%), Union (43%), Middlesex (42%) and Bergen (39%) counties also have nearly two or more out of five residents whose primary language is a language other than English.

DIET-RELATED HEALTH STATISTICS

Key Findings

- > Some New Jersey residents more frequently are identified as being obese and report being physically inactive and less frequently report consuming fruits and vegetables
 - Adults identifying as Black/African American or Hispanic, or with household incomes less than \$50,000 per year
 - o High school students identifying as Black/African American or Hispanic
 - Residents in southern counties.
- Rates of chronic conditions (i.e., coronary heart disease, diabetes, cancer) are generally highest among residents who live in southern and urban northeastern counties than other counties
- Less than half of New Jersey schools incorporate locally grown foods, have school gardens and have physical activity breaks in the classroom during the day
- Atlantic, Camden, Cape May, Cumberland, Essex, Gloucester, Ocean and Salem counties have limited food environments
- ➤ SNAP redemptions per store decreased or only slightly increased in Cape May, Hunterdon, Ocean and Salem counties (2008-2012)

In addition to understanding the socio-demographics, diet-related health outcomes, health behaviors and environmental factors that influence health are critical to assessing the needs of the SNAP-eligible population in New Jersey. The following sections summarize key data indicators related these areas.

Health Outcomes

Adult and childhood obesity as well as chronic conditions are key health outcomes related to New Jersey residents' diet.

Adult and Child Obesity

Over the past five decades, the rate of obesity nationwide has increased among children and adults. Among U.S. adults of all racial backgrounds, as of 2009-2010, 36% were obese and 6% were extremely obese (17).

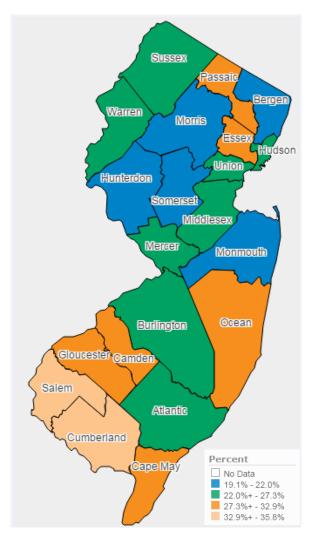
In New Jersey, 27% of adults are obese, as of 2013-2015 (18). Similar to other indicators, obesity rates vary by county. Adults more frequently report being obese in southern counties than northern (Figure 7). The six counties with the highest adult obesity rates include the following (18):

- Cumberland (36%)
- Salem (36%)
- Ocean (33%)
- Camden (31%)
- Cape May (31%)
- Gloucester (31%)

Adult obesity rates in New Jersey vary by race and ethnicity as well as income. In 2014 (19),

- Blacks/African Americans (38%) and Hispanics (31%) more frequently reported being obese than Whites (26%) and Asians (8%).
- Adults making \$25,000 to \$34,999 most frequently reported being obese (33%), followed by those making \$35,000-\$49,999 (32%) and less than \$15,000 (30%).

Figure 7. Adults more frequently report being obese in southern counties than northern



National data indicate that, 15% of U.S. children aged 2–4 years enrolled in the Special Supplemental Nutrition Program for Women, Infants and Children (WIC) were obese in 2014 (20). In 2015, 14% of high school students (grades 9-12) were obese (21). In New Jersey,

- 15% of New Jersey children, aged 2 to 4 years, participating in WIC were obese in 2014 (20).
- 9% of New Jersey high school students (grades 9-12) were obese in 2013 (21) (22).

Also in 2013, Hispanic high school students (15%) most frequently reported being obese compared to other racial and ethnic or income groups (19).

Chronic Conditions

As of 2014, the leading causes of death in New Jersey were heart disease (26%) and cancer (23%) followed by stroke (5%) and chronic lower respiratory disease (4%) (23).

In 2015, 5% of New Jersey residents reported having coronary heart disease or a heart attack (24).

• Four New Jersey counties have death rates due to heart disease that exceed the state average, as of 2014: Ocean (30%), Atlantic (27%), Bergen (27%) and Warren (27%) counties (25).

Five percent of New Jersey residents report being told that they have a non-skin related cancer, as of 2015 (24). In 2016, there were an estimated 49,800 new cases of cancer in New Jersey (26).

• Three New Jersey counties have death rates due to cancer that exceed the state average: Hunterdon (27%), Salem (26%) and Warren (25%) counties (23).

During 2011-2015, 9% of New Jersey residents reported being told by a doctor that they have diabetes (27).

• Cumberland (13%), Atlantic (12%), Passaic (11%), Essex (11%), Salem (11%), Middlesex (11%) and Union (11%) counties have the highest rates of diabetes among New Jersey counties.

More than one in four New Jersey residents (28%) has hypertension or high blood pressure (28).

• Of note, rates of hypertension exceed the state rate in the following counties: Cape May (34%), Cumberland (33%), Hudson (33%), Essex (31%), Gloucester (31%), Camden (31%) and Passaic (31%) counties.

Health Behaviors

Consumption of fruits and vegetables and regular physical activity are linked with reduced obesity rates and chronic disease rates. As such, these behaviors are important to assess to gain a more comprehensive picture of the health and wellness of New Jersey residents.

Food Consumption

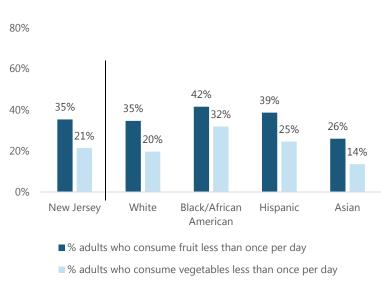
USDA guidelines recommend that children and adults consume at least five servings of fruits and vegetables per day (29). In 2013, 35% of New Jersey adults consumed less than one serving of fruit per day and 21% consumed less than one serving of vegetables per day (19).

100%

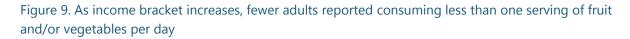
- Black/African American adults *most* frequently reported consuming less than one serving of *fruits* (42%) and *vegetables* (32%) per day (Figure 8) (19).
- As income bracket increases, fewer adults report consuming less than one serving of fruit and/or vegetables per day (Figure 9) (19).

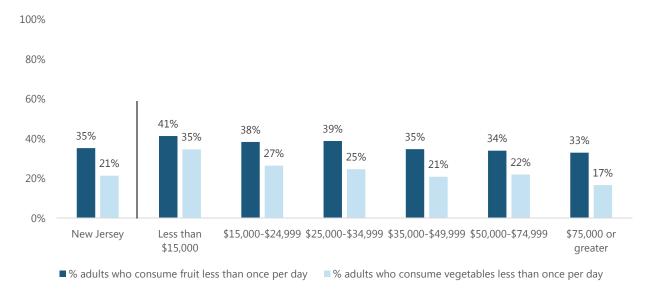
According to a 2013 survey of adolescents in New Jersey, 37% consume less than one serving of fruit per day and 37% consume less than one serving of vegetables per day (19).

Figure 8. Black/African American adults most frequently report consuming less than one serving of fruits and vegetables



- More than 40% of Hispanic adolescents consume fruit less than once per day (42%) compared to Black/African American (34%) and White (38%) adolescents (19).
- Black (46%) and Hispanic (43%) adolescents most frequently report consuming vegetables less than once a day compared to White (35%) and Asian (24%) adolescents (19).





More than one in ten adolescents in New Jersey (12%) reported consuming a sugar sweetened beverage or soda one or more times per day in 2013 (30).

• Hispanic youth most frequently reported consuming these beverage (19%) compared to other racial and ethnic groups (30).

Breastfeeding provides the proper nutrients for infant development and may also protect infants against certain childhood illness. In 2009-2011:

- 82% of New Jersey women and 78% of WIC recipients breastfeed (19).
- 17% of New Jersey women and 12% of WIC recipients exclusively breastfeed their infants at six months (19).

Black/African American women least frequently report breastfeeding (72%) and/or exclusively breastfeeding their infant for six months (9%) compared to their counterparts. Women in the 400% or higher poverty income threshold most frequently report breastfeeding their infant (84% and 82%, respectively) (19).

Physical Activity and Screen-Time

Current physical activity guidelines suggest that adults should do at least 150 minutes of moderate-intensity or 75 minutes of vigorous-intensity aerobic physical activity per week (31). In 2014, 23% of New Jersey adults did not engage in any physical activity during the previous week (19).

- Cumberland (28%), Salem (27%) and Atlantic (26%) counties have the highest rates of physical inactivity in the state (32).
- American Indian/Native Americans (43%) and Hispanics (31%) in New Jersey most frequently report being physically inactive (19)².
- Individuals with an income of less than \$15,000 (38%) more frequently report being physically inactive than those in higher income brackets (19).

The American Academy of Pediatricians recommends that parents determine restrictions for the time spent using a screened device (e.g., watching television, video games, and computer) (33). As of 2013, among adolescents in grades 9 to 12, 72% reported watching no more than 2 hours of television and 63% used a video game and computer for no more than 2 hours a day (34).

20

² There are no federally recognized American Indian tribes or reservations in New Jersey, however, Cumberland, Passaic and Atlantic counties have the greatest county proportions of the population that identify as American Indian or Alaskan Native (0.8%, 0.5% and 0.3%, respectively) (12).

Factors Influencing Diet

In addition to socio-demographic, diet-related health outcomes and health behaviors, community, environmental and policy factors influence health and nutrition. The following sections outline the status of factors related to early care and education and schools, communities and healthcare sectors.

Early Care and Education Centers and Schools

In 2017, New Jersey had 3,900 licensed child care centers with a student capacity of 350,200 (35). Essex County had the most licensed child care centers at 460 and the greatest capacity of students at 41,900. Salem County had the fewest licensed child care centers at 24 licensed child care centers and Cape May County had the least capacity of students at 1,600 (35). As of 2015:

- Nearly 13,300 children, ages 3 and 4, participated in New Jersey Head Start programs (36).
- Among those children enrolled in child care, a monthly average of 32,600 families including 48,000 children received subsidies for child care (37).
- 1,300 child care centers, nearly 500 family child care homes and 65,700 children participated in the Child and Adult Care Food Program (CACFP) (38).
- The number of children participating in CACFP increased by 16% from 2005 to 2015 (38).

In 2014-2015, an average of 687,700 New Jersey students participated in the National School Lunch Program (NSLP), of which 78% were students receiving free and reduce-priced meals. In addition, 296,700 New Jersey students participated in the School Breakfast Program (SBP), 85% of which were free and reduced-price meal students (38).

- Hudson (68%), Cumberland (66%) and Passaic (56%) counties ranked highest in the percent of students who are eligible for free or reduced price lunch in 2010 (39).
- In 2016, Bergen (26%), Hunterdon (26%) and Sussex (26%) counties ranked lowest in the percent of eligible students that are receiving breakfast at school (40).

New Jersey's public schools have made efforts toward promoting healthy foods, as evidenced in their policies and practices. For example, in 2014 (41):

• 68% of middle and high schools provide information to students or families on the nutrition and caloric content of foods available.

- 40% serve locally or regionally grown foods in the cafeteria or classrooms.
- 36% conduct taste tests to determine food preferences for nutritious items.
- 35% have a school food or vegetable garden.

In addition, 39% of New Jersey public schools had Farm to School activities in 2015. Nearly one-third (32%), however, did not have any Farm to School activities nor plan to have them (42).

Since 2009, 129 New Jersey schools have received federal funding for GreenSchools! Programs, an initiative of the United States

Department of Agriculture to develop school gardens (Figure 10)

(43).

With regard to physical activity, in 2014 (41):

- 74% of middle and high schools have a joint use agreement for shared use of school or community physical activity facilities.
- 46% of schools offer students physical activity breaks in the classroom during the school day.
- 5% of schools have a Comprehensive School Physical Activity Program.

Community-Based

Food Insecurity and Access

The Food Environment Index assesses limited access to healthy foods (i.e., living more than 1 mile from a grocery store in non-rural areas or 10 miles from a grocery store in rural areas) and food insecurity (i.e., individuals who did not have reliable access to food during the past year). On a scale of 1 to 10, with 10 being the best (i.e., highest access), New Jersey' index was 8.2 in 2013 (44). More than one in ten (12%) New Jersey residents and 64% of those living below 185% of poverty guideline are food insecure, as of 2014 (45). Food insecurity increased by 1% from 2007-2009 to 2010-2012 (46).

It is important to note that when experiencing food insecurity, individuals may be most concerned with obtaining food rather than the nutritional quality of that food.

Figure 10. GreenSchool!

Programs concentrated in the northern part of New Jersey



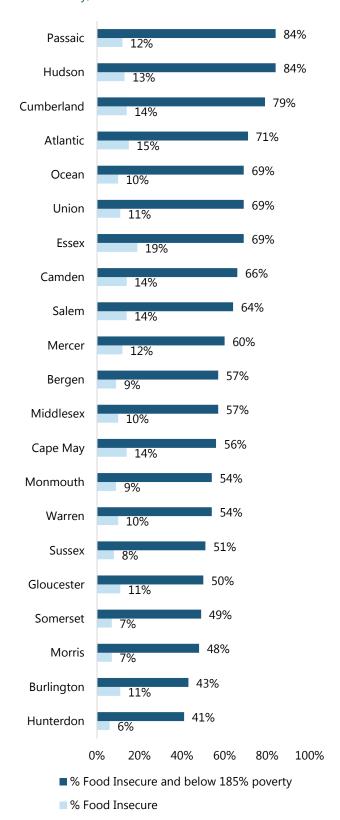
The food environment varies by county, with northeastern urban counties and southern counties reporting greater food insecurity, more limited access to grocery stores and more food deserts. Several counties are noteworthy regarding a limited food environment: Atlantic, Camden, Cape May, Cumberland, Essex, Gloucester, Ocean, and Salem.

- As of 2013, Atlantic (6.7), Cumberland (6.9), Cape May (7.1) and Essex (7.1) counties have the lowest Food Environment scores of all New Jersey counties (Figure 11) (44).
- Essex (19%), Atlantic (15%), Camden (14%), Cape May (14%), Cumberland (14%) and Salem (14%) counties rank as the highest county percentages of residents reporting food insecurity in 2014 (Figure 12) (45).
- Based on 2014 data, Passaic (84%), Hudson (84%), Cumberland (79%) and Atlantic (71%) counties rank as the highest county percentages of residents below 185% of the poverty guideline reporting food insecurity (45).
- As of 2010, Atlantic (11%), Ocean (10%), Cape May (9%) and Cumberland (9%) have the highest county percentages of low-income residents who have low access to grocery stores (i.e., live more than 1 mile from a grocery store in non-rural areas or 10 miles in rural areas) (47).

Figure 11. Atlantic, Cumberland, Cape May and Essex counties have the lowest Food Environment Index, 2013

Atlantic 6.7 Cumberland 6.9 Cape May 7.1 Essex 7.1 Ocean 7.6 Camden 7.6 Gloucester 7.8 Salem 7.8 Burlington 8.2 Mercer 8.2 Passaic 8.2 Hudson 8.2 Warren 8.3 Union 8.4 Middlesex Monmouth 8.5 Sussex 8.8 Bergen 8.9 Somerset 9.1 Morris 9.1 Hunterdon 9.3 0 8 2 6 10

Figure 12. Residents at 185% of the poverty guideline disproportionately experience food insecurity, 2014



• Ocean (n=27), Atlantic (n=14) and Burlington (n=10) counties have reported the greatest number of food deserts, however Cumberland (23%), Warren (22%) and Ocean (21%) have the greatest percentage of census tracts in their county that are food deserts, as of 2015 (Figure 13) (48).

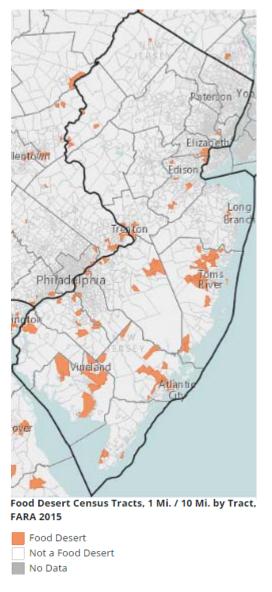
From 2008 to 2012, the number of SNAP-authorized stores increased in New Jersey. Hunterdon (149%), Ocean (128%) and Cape May (108%) counties had the largest percent increase in SNAP-authorized stores per 1,000 residents (49). During the same time period, SNAP redemptions per SNAP-authorized stores generally increased in all counties, except for Salem (50).

- In Salem County, there was a 47% decrease in SNAP redemptions per SNAP-authorized store from 2008 to 2012 (50).
- Cape May (12%), Hunterdon (40%), and Ocean (37%) counties had smaller increases than other counties (50).

In addition, access to healthy food is further limited by mobility. Findings from key informant interviews suggest that transportation is a barrier for individuals in accessing healthy foods. In areas of limited access to a grocery store or a food desert, transportation is the connection to food sources. In migrant, rural communities, such as in the farming communities in Cumberland and Salem counties, few individuals have cars and there are limited options to purchase healthy foods.

• Atlantic (7%), Cumberland (4%), Cape May (4%), Gloucester (3%), Ocean (3%) counties have the highest county percentages of households with no car and low access to grocery stores, as of 2010 (47).

Figure 13. Food deserts are more prevalent in southern areas of New Jersey than northern, 2015



Farmers Markets

In New Jersey, 151 farmers markets were reported as of 2017 (Figure 14) (43). In 2012, 13% of farmers markets accepted SNAP and 32% accepted WIC benefits (19). New Jersey authorizes farmers to accept WIC Cash Value Vouchers, which provides WIC recipients with additional benefits to purchase fruits and vegetables (19).

Findings from key informant interviews suggest that the foods available at farmers markets may not be culturally appropriate for the individuals in those communities. For example, farmers markets in predominantly Hispanic communities typically do not sell the types of vegetables and fruits that these families might want to cook and eat.

In addition to accessing healthy foods, interview findings suggest that adults and children may not be knowledgeable about healthy foods as well as how to prepare them. For some adults, they are unable to identify different types of fruits and vegetables and have never consumed or prepared them. Children whose parents or caregivers are unfamiliar with healthy foods are not exposed to them at home and lack models for eating and preparing healthy foods.

Figure 14. 151 farmers markets are in New Jersey



Opportunities for Physical Activity

Based on the 2017 County Health Rankings, 95% of New Jersey adults have access to exercise opportunities, defined as living near a park or recreational facility (public or private) (51). Specifically:

- 60% of youth have parks or playground areas, community centers and sidewalks or walking paths available in their neighborhood, as of 2011-2012 (19).
- 45% of adults live within a half mile of a park (19).

Access to exercise opportunities varies by county such that residents in southern counties less frequently report living near a park or recreational facility. In more rural counties, facilities may be more spread out.

• Cumberland and Salem Counties rank the lowest of all counties in terms of close access to exercise opportunities (65% and 69%, respectively) (51).

• Burlington and Ocean counties follow at 85% and 86%, respectively (44).

Opportunities for walking and biking are enhanced by Complete Streets policies in New Jersey. New Jersey has a statewide Complete Streets policy, requiring that when using funding from the New Jersey Department of Transportation for new or retrofit street projects, street projects must provide "safe access for all users by designing and operating a comprehensive, integrated, connected multi-modal network of transportation options" (52). In addition, seven counties (including, Camden, Essex, Hudson, Mercer, Middlesex, Monmouth, Passaic) and 130 municipalities (23% of municipalities) have their own Complete Street ordinances (52).

DIET-RELATED PROGRAMS AND SERVICES

Key Findings

- > 80 diet-related programs and services exist in New Jersey
- > The majority of existing programs are efforts that use community and public health approaches
- Existing programs and services serve low-income New Jersey residents across the lifespan

In addition to the SNAP-Ed program, 80 statewide nutrition-related programs serve the SNAP eligible population in New Jersey. These programs include those outlined below. (See Appendix 1 for additional program details.) They are categorized in terms of whether the program is an individual or group-oriented interventions, an effort that addresses three or more levels of the Social Ecological Model (e.g., intrapersonal, interpersonal, community, environment or policy) or an effort that addresses a broad population through community and public health approaches (Tables 2 - 4).

Several programs and services serve individuals across the lifespan. For example:

- Grow Healthy NJ, a collaborative effort of the New Jersey Departments of Children and Families, Education, Health and Human Services, promotes quality and comprehensive early care and education centers for young children.
- The New Jersey YMCA State Alliance's Healthy U provides health education and policy and environmental change support for New Jersey schools, after school programs and preschool programs.
- Meals on Wheels provides meals for older adults, among others.

Nutrition-related programs in New Jersey also include coalitions and advocacy organizations, such as the following:

- Advocates for Children of New Jersey, who spearhead the Breakfast in the Classroom campaign.
- Rural Health Advisory Committee, which the New Jersey Department of Health spearheads to bring together stakeholders to address specific health concerns in rural areas of New Jersey.
- The North Jersey Health Collaborative, a set of diverse partners to share health assessment and planning to identify collaborative actions to address the most important health concerns.

Table 2. Statewide, there are 12 individual or group-based nutrition efforts

COORDINATING AGENCY	RELEVANT PROGRAM(S)
Community Food Bank of NJ	Family Pack Program
	Kids Café
	Food Service Training Academy
	Nutrition Education
	Youth Outreach (e.g., Students Change Hunger, Teen Hunger
	Institute, Hunger Summit, Hunger Action Month)
Meals On Wheels	Meals on Wheels, Congregate Meals, and Weekend Meals
	Programs
New Jersey American Academy of Pediatrics (AAP)	Bright Futures
New Jersey YMCA State Alliance	YMCA Diabetes Prevention Program
Rutgers University	Functional Foods for Life
	Get Moving, Get Healthy New Jersey
	Grow Healthy
	New Jersey 4-H

Table 3. Statewide, there are 13 comprehensive, multi-level intervention efforts

COORDINATING AGENCY	RELEVANT PROGRAM(S)
AmeriHealth New Jersey	Commit2Wellness
Food Corps	Food Corps
HealthCorps	HealthCorps Living Labs
Isles	Community Gardening Program
	School Gardening and Youth Education Program
New Jersey Department of Health	Healthy Beginnings NJ
	Early Care and Education Learning Collaborative Initiative
	Worksite Wellness Initiative
	Seniors Farmers' Market Nutrition Program (SFMNP)
	Special Supplemental Nutrition Program for Women, Infants, and Children (WIC)
New Jersey Department of Human Services	Medicaid Accountable Care Organizations
New Jersey Department of State	Faithful Families Eating Smart and Moving More
New Jersey Departments of Children and Families, Education, Health and Human Services	Grow NJ Kids

Table 4. Statewide, there are 55 community and public health approach efforts

COORDINATING AGENCY	RELEVANT PROGRAM(S)
Advocates for Children of New Jersey	New Jersey School Breakfast Campaign
Alliance for a Healthier Generation	Healthy Schools Program
	Healthy Out-of-School Time
American Heart Association, The Food	New Jersey Food Access Initiative
Trust, and the New Jersey Partnership	Healthy Corner Stores Initiative
for Healthy Kids	
Campbell's Soup	Campbell's Healthy Communities
	City Green Farms
City Green	Growing Strong
	New Ground
	City Sprouts
Community Food Bank of NJ	Mobile Pantry
	Community Assistance Pantry
New Jersey Agricultural Society	Farmers Against Hunger
New Jersey Anti-Hunger Coalition	NJ Food for Thought Campaign
	After School Snack Program
	Child and Adult Care Food Program (CACFP)
	Emergency Food Assistance Program (TEFAP)
	Farm to Preschool
	Farm to School
	Fresh Fruit and Vegetable Program
	National School Lunch Program
New Jersey Department of Agriculture	School Breakfast Program (SBP)
	Gleaning Support Program
	School Nutrition Program
	Seamless Summer Option
	Special Milk Program+B56
	Summer Food Service Program for Children (SFSP)
	Jersey Fresh Jersey Grown
	Commodity Supplemental Food Program (CSFP)
	Farmers' Market Nutrition Program (FMNP)
	New Jersey Health Information Network (NJHIN)
New Jersey Department of Health	Rural Health Advisory Committee
	Federally Qualified Health Centers
	Diabetes Resource Coordination Centers
	Population Health Action Team
	State Nutrition Action Committee/Council
	Regional Chronic Disease Coalition of NJ

COORDINATING AGENCY	RELEVANT PROGRAM(S)
New Jersey Department of Human Services	Congregate Housing Services Program
	Supplemental Security Income (SSI) Program
	Temporary Assistance to Needy Families (TANF)
New Jersey Health Care Quality Institute	Mayors Wellness Challenge
New Jersey Healthy Communities Network	Healthy Community Grants Program
New Jersey Prevention Network	Coalition for a Healthy NJ
	Get Active NJ
Name Lawrence VAACA Chaha Alliana	New Jersey Partnership for Healthy Kids
New Jersey YMCA State Alliance	Healthy U
North Jersey Health Collaborative	North Jersey Health Collaborative
Produce for Better Health and Centers	Fruits and Veggies More Matters
for Disease Control and Prevention	
Robert Wood Johnson Foundation	New Jersey Health Initiatives (Communities Moving to Action, BUILD Health Challenge, Next Generation Community Leaders)
Rutgers University	Cooperative Extension
	Food Institute at Rutgers: Center for Childhood Nutrition
	Education and Research
	New Jersey Safe Routes to School
Sustainable Jersey	Municipal Certification Program
	Schools Certification Program

Findings from key informant interviews highlight that although there are many groups working to improve nutrition and increase access to health foods for low-income New Jersey residents, a central coordinating agency that unites these groups is lacking. Programs and services continue to overlap and it is critical to communicate across programs and agencies to avoid and/or minimize duplications of services.

UNDERSERVED OR LIMITED ACCESS AREAS

Key Findings

- In southern New Jersey, Atlantic, Camden, Cumberland, Gloucester and Salem counties have large proportions of the population that are obese, physically inactive, low-income and have limited access to healthy foods and physical activity opportunity; however SNAP reach has decreased in these areas
- In northeastern urban New Jersey, Essex and Passaic counties have large proportions of the population that are obese, low-income and have limited access to healthy foods
- Cape May and Ocean counties have the largest percentage of older adults among all New Jersey counties and have large proportions of the population that are obese, lowincome and have limited access to healthy foods

Based on the data compiled and collected as part of this needs assessment, three key geographic areas of New Jersey may be underserved or have limited access to SNAP-Ed: rural, southern New Jersey counties and areas; northeastern urban counties and areas; counties and areas with large percentages of older adults.

Southern New Jersey Counties and Areas

Data suggest that southern New Jersey counties, outside of the densest population centers of the state, may be underserved and have unmet needs regarding diet and health. Particular counties of need include Atlantic, Camden, Cumberland, Gloucester and Salem. Relative to statewide rates and other counties, these counties:

- rank the highest for rates of adult obesity and physical activity;
- have limited food environments, suggesting that residents in these counties may have difficulty accessing healthy foods;
- have fewer opportunities for exercise, particularly in Salem and Cumberland counties and
- have greater percentages of residents who are low-income, in poverty, or at risk of being in poverty (i.e., ALICE).

Findings from key informant interviews suggest that rural areas of these counties may be another specific area with unmet needs. For example, Salem, Cumberland, Burlington, Gloucester and part of Camden counties are rural. As one key informant described, residents may live on farms, which may be located in areas with limited access to grocery stores and places to exercise. Moreover, the key informant explained that some residents live in migrant farm worker camps, which may have a cook or rely on one person who can travel to obtain food for all workers during the week. Interview findings indicate that residents in these areas can be hard to reach but in need of greater access to healthy foods and physical activity.

Despite this need, services and participation in such services have not increased in these areas.

- From 2016 to 2017, SNAP caseloads decreased in Burlington, Salem and Gloucester counties.
- SNAP redemptions per SNAP authorized stores also decreased in Salem County during 2008-2012.
- Participation in school-related meal programs is lacking throughout New Jersey, particularly in Cumberland County.

With limited access to physical activity opportunities, limited access to healthy food and low participation rates in school-based food assistance programs, children in these counties may be an important population that has unmet needs.

Northeastern Urban Counties and Areas

At the opposite end of New Jersey, northeastern urban counties may also be underserved and have unmet needs regarding diet and health. Particular counties of need include Essex and Passaic. Relative to statewide rates and other counties, these counties:

- have limited food environments, suggesting that residents in these counties may have difficulty accessing healthy foods; and
- have greater percentages of residents who are low-income, in poverty, or at risk of being in poverty (i.e., ALICE).

Unlike southern New Jersey counties, services are available and working to address these needs as SNAP services are increasing in these areas. The needs, however, outweigh the services available, due, in part, to the population density of these areas.

With limited access to healthy food and low participation rates in school-based food assistance programs, children in these areas may be an important population that has unmet needs.

Counties and Areas with Large Percentages of Older Adults

In addition to southern counties and northeastern urban areas, areas with older populations may have unmet needs. Of note, Ocean and Cape May counties have the largest percentages of older adults among the 21 counties, at 23% and 22%, respectively. Relative to statewide rates and other counties, these counties also:

- rank the highest for rates of adult obesity and physical activity;
- have limited food environments, suggesting that residents in these counties may have difficulty accessing healthy foods;
- have greater percentages of residents who are low-income, in poverty, or at risk of being in poverty (i.e., ALICE); and
- had the greatest percent increases of SNAP authorized stores and the smallest increases in SNAP redemptions between 2008-2012.

As the population ages, the need for additional services directed toward older adults also will likely grow. With large retirement communities in Ocean and Cape May counties, ensuring that older adults on fixed incomes have access to healthy foods that are affordable and to safe exercise opportunities are critical.

Areas to Watch: Rural Northwestern Counties

Although not a key finding of this assessment, data suggests that rural areas in Warren and Sussex counties may have areas of need that have been underserved. Findings from key informant interviews suggest that neighborhoods in these counties are rural and have limited access to healthy foods and opportunities for physical activity. Warren County has the second highest percent of food deserts compared to other New Jersey counties. Moving forward, it is important to monitor the status of health outcomes, health behaviors and environmental factors that influence health in these areas.

IMPLICATIONS AND RECOMMENDATIONS

The sections above describe the nutrition, physical activity and obesity needs as well as barriers to accessing healthy foods and physical activity. These sections also highlight statewide programs and services that address nutrition needs among low-income populations. Results from key informant interviews and data compiled from publicly available sources suggest that obesity, physical inactivity, consumption of healthy foods and limited access to healthy foods and physical activity are particular issues in southern counties, northeastern urban counties as well as counties with relatively large percentages of older adults.

Recommendations

A number of actionable recommendations have emerged for planning intervention strategies and approaches from the findings, particularly those from the key informant interviews. CREEHS has strived to collect reliable data from a range of sources and to present findings and recommendations in a cohesive manner in an effort to facilitate identifying intervention strategies for the SNAP-Ed implementing agency.

As noted, key recommendations from the publicly available data include the following:

- Target SNAP-Ed efforts to southern New Jersey counties, including Atlantic, Camden, Cumberland, Gloucester and Salem. These counties have large proportions of the population that are obese, physically inactive, low-income and have limited access to healthy foods and physical activity opportunity; however SNAP reach has decreased in these areas.
- Consider expanding or enhancing SNAP-Ed programs and services in northeastern urban New Jersey, specifically Essex and Passaic counties. In these counties, large proportions of the population are obese, low-income and have limited access to healthy foods. The need may be outpacing the services available.
- Explore opportunities for providing additional SNAP-Ed services in Cape May and Ocean
 counties, which have the largest percentage of older adults among all New Jersey counties. These
 counties also have large proportions of the population that are obese, low-income and have
 limited access to healthy foods.
- 4. Conduct additional interviews with key informants to identify and/or vet diet-related programs and services in New Jersey as well as identify potential barriers for low-income individuals in accessing healthy foods and opportunities for physical activity. These interviews may also help identify specific municipalities or neighborhoods within the recommended target areas that may be particularly underserved.

5. Conduct focus groups with SNAP participants and SNAP eligible non-participating residents in the identified areas to better understand barriers to accessing healthy foods and opportunities for physical activity as well the programs and services they already use.

Additional recommendations emerged from the key informant interviews conducted as part of this needs assessment. These may be considered as approaches and strategies are selected to meet the needs of low-income New Jersey residents.

- 1. Consider directing intervention strategies toward children and young families to ensure they have models for healthy lifestyles, information about healthy living and access to healthy foods and opportunities for exercise.
- 2. Explore opportunities for and support the development of a central coordinating agency that facilitates efforts related to healthy eating and access to healthy foods. This may include convening regular and ongoing discussions among service delivery providers, transportation partners, healthy food sources and providers (i.e., farmers) and other partners to ensure that all efforts are working toward the same goal.
- 3. Consider selecting setting-based interventions that are directed to the places where people spend their time as part of their daily life. This may include linking to existing worksite, faith-based or school-based programs to enhance the efforts provided.
- 4. Collaborate with existing programs to increase awareness of and participation in food assistance programs. This may include partnering with agencies to enhance School Breakfast campaigns, summer meal participation and others.
- Use technology to make healthy information and locations of healthy food and opportunities for exercise easily accessible and streamlined. This may include using text messaging or mapping applications.
- 6. Consider further exploring the specific needs, experiences and assets related to accessing healthy foods and opportunities for physical activity of immigrant and migrant populations.

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APPENDIX 1: DIET-RELATED PROGRAMS AND SERVICES

Table 1. Individual or Group-Based Strategies

COORDINATING AGENCY	RELEVANT PROGRAM(S)	MISSION	WEBSITE
Community Food Bank of NJ	Family Pack Program	"To fight hunger and poverty in New Jersey by assisting those in need and seeking long-term solutions. Today, the Community Food Bank of New Jersey distributes 44 million pounds of food a year to more than 1,000 non-profit programs, as well as more than 400 programs served by its Partner Distribution Organizations (PDOs)."	http://www.cfbnj.org/hope/ feeding-programs/family- pack-program/
Community Food Bank of NJ	Kids Café	"Kids Cafe is a program of Feeding America, is the country's largest after-school meal service, providing free and prepared food, as well as nutrition education, to hungry children. The Kids Cafe program is intended to help children escape the cycle of poverty by giving agencies and/or social service charities nutritious meals to serve in exchange for an agreement from the agencies to act as safe havens for the children. In addition, the Food Bank partners with local after-school programs that provide children with academic tutoring and a variety of recreational and educational activities with adult supervision."	http://www.cfbnj.org/hope/ feeding-programs/kids- cafe/
Community Food Bank of NJ	Food Service Training Academy	"As part of the Community Kitchen, the Food Service Training Academy (FSTA) is a culinary job-training program that provides graduates with marketable skills and changes lives. Since 2000, the program has graduated more than 900 students. Close to 90 percent are employed within six months of graduation."	http://www.cfbnj.org/hope/ fsta/
Community Food Bank of NJ	Nutrition Education	"Good nutrition is the foundation on which to build a life of good health. Teaching parents to shape the lives of their children by exposing them to healthy, nutritious foods early in life. Offering whole grain products, fruits, vegetables and low-fat dairy products — instead of high-fat, processed or fast foods — can decrease the risk of becoming overweight. This can also lower the risk of health problems, such as diabetes, high blood pressure or heart problems later in life."	http://www.cfbnj.org/hope/ assistance/nutrition/

COORDINATING AGENCY	RELEVANT PROGRAM(S)	MISSION	WEBSITE
Community Food Bank of NJ	Youth Outreach (e.g., Students Change Hunger, Teen Hunger Institute, Hunger Summit, Hunger Action Month)	"The Youth Hunger Awareness program is dedicated to educating children, teens and young adults about hunger and poverty issues. This program has learning modules, seminars, classes, etc. about hunger in New Jersey and how to help those in need across our state. It offers opportunities for teens and young adults to get involved.	http://www.cfbnj.org/hope/assistance/youth/
Meals On Wheels	Meals on Wheels, Congregate Meals, and Weekend Meals Programs	"Meals on Wheels has been guided by a single goal since the first known U.S. delivery by a small group of Philadelphia citizens in 1954 – to support our senior neighbors to extend their independence and health as they age. What started as a compassionate idea has grown into one of the largest and most effective social movements in America, currently helping nearly 2.4 million seniors annually in virtually every community in the country."	http://www.mealsonwheels america.org/
New Jersey American Academy of Pediatrics (AAP)	Bright Futures	"Serving as a guidepost for ensuring the children in New Jersey have the opportunity to attain optimal health, safety and well-being, the Chapter established the Agenda for Children. The Agenda illuminates the priority areas that the Chapter believes to be essential for supporting pediatric healthcare provider's efforts to address the complex needs of the children and families for whom they care.	http://njaap.org/programs/ bright-futures/
New Jersey YMCA State Alliance	YMCA Diabetes Prevention Program	"The YMCA Diabetes Prevention Program is based on research funded by the National Institutes of Health and the Centers for Disease Control and Prevention which showed that by eating healthier, increasing physical activity and losing a small amount of weight, a person with prediabetes can prevent or delay the onset of type 2 diabetes by 58%."	http://www.njymca.org/mai n/diabetes-prevention- program/
Rutgers University	Functional Foods for Life	"Consumers interest in the connection between the food they eat and the possible benefits foods may provide to their health led to the development of Functional Foods for Life. The curriculum was developed to meet consumer needs by providing evidence based information on six specific functional foods that have research linking them to playing a role in the prevention of certain chronic diseases. Functional foods are defined as those that have the potential to benefit health when consumed as part of a varied diet."	http://njaes.rutgers.edu/fun ctional-foods/

COORDINATING AGENCY	RELEVANT PROGRAM(S)	MISSION	WEBSITE
Rutgers University	Get Moving, Get Healthy New Jersey	"Get Moving - Get Healthy New Jersey seeks to improve the health of individuals, families and communities by encouraging a healthy lifestyle, especially healthy eating and physical activity, through educational programs, a website, publications, and targeted marketing campaigns."	http://getmovinggethealthy nj.rutgers.edu/
Rutgers University	Grow Healthy	"Grow Healthy joins families, schools, childcare/preschool sites, and the community together so they can make wellness and learning top properties by assisting schools with sustaining an overall healthier school environment and teaches students and their families to live healthy."	http://growhealthy.rutgers.e du/
Rutgers University	New Jersey 4-H	"The 4-H youth development program has a long history of promoting healthy living among youth and their families. Healthy food and nutrition has been addressed by the program since its inception in 1902. In fact, one of the H's represents Health in the 4-H pledge. By supporting the physical, mental, and emotional health of our nation's youth, we help them lead healthy and productive lives into adulthood."	https://nj4h.rutgers.edu/hea lthyliving/

Table 2. Comprehensive, Multi-Level Interventions

COORDINATING AGENCY	RELEVANT PROGRAM(S)	MISSION	WEBSITE
AmeriHealth New Jersey	Commit2Wellness	"Every AmeriHealth New Jersey plan comes equipped with our free Commit2Wellness® suite of programs. As a member, you'll benefit from incentives and tools to help you get well and further resources to help you stay well. One of our most motivating wellness programs is Commit2Wellness® Rewards, which actually rewards members for healthy living. As you complete healthy activities, you'll earn Wellness Dollars, which can be redeemed for gift cards to New Jersey's most popular retailers or for a Visa® debit card."	https://www.amerihealthnj. com/html/wellness progra ms/
Food Corps	Food Corps	"Together with communities, FoodCorps serves to connect kids to healthy food in school by creating a future in which all children–regardless of class, race, or geography–know what healthy food is, care where it comes from, and eat it every day."	https://foodcorps.org/
HealthCorps	HealthCorps Living Labs	"The purpose of HealthCorps is to provide teens with tools that can improve their physical and mental health so they can learn to live more productive and happier lives by showing young people that the everyday choices they make about what they put in their mouths, how much they move and how positively they think and persevere, impacts how independent a life they will live."	https://www.healthcorps.or
Isles	Community Gardening Program	"The purpose of the Community Gardening program is to increase community gardens which can help families meet their food needs by increasing access to fresh and nutritious foods at low cost. Currently, it supports more than 60 community gardens across the city of Trenton by providing technical and organizational assistance to local residents and other community-based organizations."	https://isles.org/services/ur ban- agriculture#.WPFPzvkrJ0w
Isles	School Gardening and Youth Education Program	"Through gardening and growing food, the School Gardening and Young Education program perseveres to demonstrate the significance of growing food locally to improve nutrition, reduce the cost of feeding families, and teach children about the critical connection they have to the earth."	https://isles.org/services/ur ban- agriculture#.WPFPzvkrJ0w

COORDINATING AGENCY	RELEVANT PROGRAM(S)	MISSION	WEBSITE
New Jersey Department of Health	Healthy Beginnings NJ	"The New Jersey Hospital Association provides technical assistance to 18 maternity hospitals in implementing the WHO/UNICEF's -10 Steps to Breastfeeding Success which promotes exclusive and sustained breastfeeding through programs such as: - The Baby-Friendly Hospital Initiative (BFHI) which was launched by the World Health Organization (WHO) and the United Nations Children's Fund (UNICEF) in 1991 to encourage and recognize hospitals and birthing centers that offer an optimal level of care for infant feeding and mother/baby bonding."	http://www.state.nj.us/healt h/nutrition/services- support/breastfeeding/
New Jersey Department of Health	Early Care and Education Learning Collaborative Initiative	"The Early Care and Education Learning Collaborative Initiative promotes healthy environments, policies and best practices to address childhood obesity. This initiative includes a series of 5 trainings, on-site Technical Assistance and Quality Improvement Items to help support programs in improving their policies and practices. NJ's ECELC Initiative has trained close to 200 licensed child care centers since 2013."	http://www.state.nj.us/healt h/nutrition/services- support/schools/earlycare.s html
New Jersey Department of Health	Worksite Wellness Initiative	"The goal of the Worksite Wellness initiative is to increase physical activity of employees during work hours."	http://www.nj.gov/health/n utrition/services- support/worksites/
New Jersey Department of Health	Seniors Farmers' Market Nutrition Program (SFMNP)	"The purpose of the Senior Farmers' Market Nutrition Program (SFMNP) is to provide unprepared, locally grown fresh fruits, vegetables, and herbs for the nutritional health of New Jersey's senior citizens, and to expand the awareness and use of the local farmers' markets."	https://www.state.nj.us/heal th/fhs/wic/farmermktsenior .shtml
New Jersey Department of Health	Special Supplemental Nutrition Program for Women, Infants, and Children (WIC)	"New Jersey WIC Services provides supplemental nutritious foods to pregnant, breastfeeding and postpartum women, infants and children up to the age of five. WIC services include nutrition education and counseling, breastfeeding promotion and support, immunization screening and health care referrals."	http://www.state.nj.us/healt h/fhs/wic/
New Jersey Department of Human Services	Medicaid Accountable Care Organizations	"In August 2011, Governor Christie signed into law NJ P.L. 2011, Chapter 114 requiring DMAHS to establish a three year Medicaid Accountable Care Organization (ACO) demonstration project. ACOs are designed to improve health outcomes, quality and access to care through regional collaboration, and shared accountability while reducing costs."	http://www.nj.gov/humans ervices/dmahs/info/aco.ht ml

COORDINATING AGENCY	RELEVANT PROGRAM(S)	MISSION	WEBSITE
New Jersey Department of State	Faithful Families Eating Smart and Moving More	"The New Jersey Office of Faith Based Initiatives (NJOFBI) continues to strive toward its mission to eliminate all barriers to funding and other resource opportunities, create greater access for partnership and enhance the capacity of faith and community based organizations (FBCOs) to effectively design, implement, successful programs and efficiently manage the day to day operations of their organization."	http://www.nj.gov/state/pro grams/dos program faith based.html
New Jersey Departments of Children and Families, Education, Health and Human Services	Grow NJ Kids	"Grow NJ Kids is a state-sponsored initiative to raise the quality of child care and early learning throughout New Jersey. It provides child care and early learning programs resources to assess and improve their programs, while providing parents with information that allows them to evaluate the quality of programs and make the best choices for their child. The goal is to create a system that encourages ongoing improvement."	http://www.grownjkids.co m/

Table 3. Community and Public Health Approaches

COORDINATING AGENCY	RELEVANT PROGRAM(S)	MISSION	WEBSITE
Advocates for Children of New Jersey	New Jersey School Breakfast Campaign	"Advocates for Children of New Jersey purpose is to help all children grow up safe, healthy and educated, so they can become productive adults, contributing to New Jersey's communities, securing their future and making the state a better place to live."	https://acnj.org/
Alliance for a Healthier Generation	Healthy Schools Program	"The purpose of the Healthy Schools program is to reduce the prevalence of childhood obesity and to empower kids to develop lifelong, healthy habits by building healthier school environments. Currently, it's building healthier school environments for more than 19 million students in more than 31,000 schools in every state and the District of Columbia and Puerto Rico"	https://www.healthiergener ation.org/about_us/
Alliance for a Healthier Generation	Healthy Out-of-School Time	"The Healthy Out-of-School Time promotes healthy environments where youth can eat better and move more. The framework of this program combines best practices for healthy eating and physical activity standards to create a guide for communities nationwide to transform the areas where kids spend their time before school, after school, and during school breaks."	https://www.healthiergener ation.org/about_us/
American Heart Association, The Food Trust, and the New Jersey Partnership for Healthy Kids	New Jersey Food Access Initiative	"The American Heart Association, The Food Trust, and the New Jersey Partnership for Healthy Kids have been working to educate policymakers at the state level about the lack of healthy food access in many lower-income communities and the impact of the program to build support for state investment in the initiative."	http://www.healthyfoodacc ess.org/policy-efforts-and- impacts/state-and- local/new-jersey
American Heart Association, The Food Trust, and the New Jersey Partnership for Healthy Kids	Healthy Corner Stores Initiative	"The New Jersey Healthy Corner Store Initiative is a project of the American Heart Association, The Food Trust and the New Jersey Partnership for Healthy Kids that is increasing healthy food access by linking community partners with corner store owners to help them profitably stock, market, and sell nutritious, affordable foods in communities that are underserved by supermarkets."	http://njhealthycornerstore s.heart.org/

COORDINATING AGENCY	RELEVANT PROGRAM(S)	MISSION	WEBSITE
Campbell's Soup	Campbell's Healthy Communities	"Access to fresh, nutritious and affordable food is a hallmark of our social impact program, Campbell's Healthy Communities, which operates in our hometown communities to address issues of food security, nutrition education, health and well-being. This \$10 million, 10-year initiative is directed toward measurably improving the health of young people in our hometown communities. Campbell's Healthy Communities is focused on four key areas — food access, physical activity and access, nutrition education and public will. The core of the program is in the collective impact approach."	http://www.campbellcsr.co m/people/access.html#our
City Green	City Green Farms	"The purpose of the City Green Farms program is to increase food security by providing access to healthy, affordable, culturally appropriate food; and to use gardening and growing food as a catalyst for urban revitalization both on the personal and community level. The City Green Farms program includes two organic farm sites – ½ acre site in Eastside Park in Paterson and a 5-acre site in Clifton at Schultheis farm. This Farm program produces a variety of organic produce that is distributed through City Green Farms Market program and the Good Food Box donation program."	http://citygreenonline.org/f arms-and-markets
City Green	Growing Strong	"City Green's Growing Strong Program offers paid summer employment to local High School students who work on the City Green Farms, at the City Green Farm Stands and at the City Sprouts Learning Garden Summer Camp. In addition to providing local youth with job opportunities, the program provides all participants with formal job training related to their responsibilities and a youth development program."	http://citygreenonline.org/g rowing-strong
City Green	New Ground	"The New Ground Program is City Green's adult community-based garden and education program facilitating the development of community gardens, green spaces and natural beautification projects while promoting community collaboration. From horticultural therapy projects to greening city blocks with a group of motivated neighbors, New Ground helps bring nature and fresh food to urban neighborhoods."	http://citygreenonline.org/new-ground

COORDINATING AGENCY	RELEVANT PROGRAM(S)	MISSION	WEBSITE
City Green	City Sprouts	"The City Sprouts Program is a gardening, environmental education and recreational program that provides children the opportunity to participate in gardening experiences, develop a deeper understanding of the natural environment, and gain understanding of food systems and the importance of eating healthy foods as well as having access to outdoor recreational activities in their own community."	http://citygreenonline.org/c ity-sprouts
Community Food Bank of NJ	Mobile Pantry	"The Mobile Pantry is on the road and in action, providing food to people living in communities where resources are limited or no pantry services."	http://www.cfbnj.org/hope/ feeding-programs/mobile- pantry/
Community Food Bank of NJ	Community Assistance Pantry	"CAP is a choice pantry which provides food for individuals living in communities with no pantry services. It allows clients make their own selections of food available to them."	http://www.cfbnj.org/hope/ feeding- programs/community- assistance-pantry/
New Jersey Agricultural Society	Farmers Against Hunger	"The purpose of the Farmers Against Hunger is to preserve and enhance agriculture, farming, and related activities and businesses in New Jersey through educational, informational, and promotional programs."	http://www.njagsociety.org/ farmers-against- hunger.html
New Jersey Anti-Hunger Coalition	NJ Food for Thought Campaign	"The purpose of the New Jersey Anti-Hunger Coalition is to educate the public and decision-makers about hunger by implementing changes to ensure that every single New Jersey resident has healthy food to eat every single day."	http://www.njahc.org/
New Jersey Department of Agriculture	After School Snack Program	"To provide children with a nutritional boost during supervised education and enrichment activities that occur after the end of their regular school day."	http://www.nj.gov/agriculture/divisions/fn/childadult/school snack.html
New Jersey Department of Agriculture	Child and Adult Care Food Program (CACFP)	"The Child and Adult Care Food Program (CACFP) serves nutritious meals and snacks to eligible participants enrolled for care at participating day care centers and day care homes. The program promotes the development of basic nutritional concepts and provides nutritious, well-balanced meals fostering sound eating habits that enable participants to become caretakers of their own nutritional habits. CACFP also provides meals to children residing in homeless shelters and snacks to youths participating in after-school care programs."	http://www.nj.gov/agriculture/divisions/fn/childadult/food.html

COORDINATING AGENCY	RELEVANT PROGRAM(S)	MISSION	WEBSITE
New Jersey Department of Agriculture	Emergency Food Assistance Program (TEFAP)	"The Emergency Food Assistance Program (TEFAP) was designed to distribute federally donated food to eligible, needy persons throughout the country. This program currently provides over 70 different food items such as: Fresh fruits and vegetables, poultry, fish, ham, rice, pasta, cereal, canned beans, raisins, peanut butter, bottled fruit juices, milk, canned fruits and vegetables etc., to New Jersey's eligible citizens challenged by food insecurity."	http://www.nj.gov/agriculture/divisions/fn/fooddistrib/tefap.html
New Jersey Department of Agriculture	Farm to Preschool	"Early Childcare is the perfect place to highlight local products and feature fresh food, agriculture, and nutrition education for our youngest eaters. From taste tests to school gardens, multiple resources are available to help sites and sponsors bring local food to early childcare settings."	http://www.farmtoschool.nj .gov/agriculture/farmtoscho ol/summer-preschool/ece/
New Jersey Department of Agriculture	Farm to School	"Through the New Jersey Department of Agriculture's Farm to School Program, schools throughout New Jersey can partner with NJ farmers to source more than 100 types of Jersey Fresh produce grown here in the Garden State. Opportunities exist for New Jersey farmers to provide agricultural products to school food service departments throughout the growing season. Additionally, the Farm to School Program includes schools garden activities, which help teach students where food comes from by growing it themselves. Students benefit by learning the science behind farming and the nutritional values of fresh products and gain a greater understanding and appreciation of the environment."	http://www.farmtoschool.nj .gov/
New Jersey Department of Agriculture	Fresh Fruit and Vegetable Program	"The Fresh Fruit and Vegetable Program exposes school children to new, healthier foods and increases their fruit and vegetable consumption, ultimately leading to lifelong dietary habits. The federal program, which came to New Jersey for the first time in the 2008-2009 school year, provides fresh fruits and vegetables to students on a regular basis."	http://www.nj.gov/agricultu re/divisions/fn/childadult/fr uitandvegetable.html

COORDINATING AGENCY	RELEVANT PROGRAM(S)	MISSION	WEBSITE
New Jersey Department of Agriculture	National School Lunch Program	"To provide a nutritious, well-balanced lunch for children in order to promote sound eating habits, to foster good health and academic achievement and to reinforce the nutrition education taught in the classroom. A school lunch will provide 1/3 of the Recommended Dietary Allowances for lunch and be consistent with the Dietary Guidelines for Americans and caloric goals."	http://www.nj.gov/agricultu re/divisions/fn/childadult/s chool lunch.html
New Jersey Department of Agriculture	School Breakfast Program (SBP)	"To provide a nutritious, well-balanced breakfast in order to promote sound eating habits, to foster good health and academic achievement in school age children. A school breakfast must provide 1/4 of the Recommended Dietary Allowances, and be consistent with the Dietary Guidelines for Americans and calorie goals."	http://www.nj.gov/agriculture/divisions/fn/childadult/school breakfast.html
New Jersey Department of Agriculture	Gleaning Support Program	"Gleaning Support Program funds to support gleaning activities that may be requested from the New Jersey Departmet of Agriculture by interested eligible nonprofit entities who are gleaning from New Jersey farms and distributing such gleaned food to New Jersey organizations to help feed New Jersey's hungry."	http://www.state.nj.us/agric ulture/grants/gleaninggrant s.html
New Jersey Department of Agriculture	School Nutrition Program	"The programs within the School Nutrition Programs are the National School Lunch Program, the School Breakfast Program, the After-school Snack Program, and the Special Milk Program. These programs are available to eligible public and non-profit private schools and child care institutions on request. By participating in these programs, each school or institution that serves a lunch or milk complying with the requirements can receive financial assistance."	http://www.nj.gov/agricultu re/divisions/fn/childadult/s chool.html
New Jersey Department of Agriculture	Seamless Summer Option	"The Seamless Summer Option combines features of the National School Lunch Program (NSLP), School Breakfast Program (SBP), and Summer Food Service Program (SFSP). This option reduces paperwork and administrative burden, making it easier for schools to feed children from low-income areas during the traditional summer vacation periods."	http://www.nj.gov/agriculture/divisions/fn/childadult/school summer.html
New Jersey Department of Agriculture	Special Milk Program+B56	" The objective of the Special Milk Program is to encourage the consumption of milk by children in order to foster good health and academic achievement."	http://www.nj.gov/agriculture/divisions/fn/childadult/schoolmilk.html

COORDINATING AGENCY	RELEVANT PROGRAM(S)	MISSION	WEBSITE
New Jersey Department of Agriculture	Summer Food Service Program for Children (SFSP)	"The Summer Food Service Program (SFSP) provides free, nutritious meals and snacks to help children in low-income areas get the nutrition they need to learn, play and grow throughout the summer months when they are out of school. The Food and Nutrition Service, an agency of the U.S. Department of Agriculture, administers SFSP at the federal level. State education agencies administer the program in most states. In New Jersey, the state Department of Agriculture is the administering agency."	http://www.state.nj.us/agric ulture/divisions/fn/childad ult/summer food.html
New Jersey Department of Agriculture	Jersey Fresh	"Jersey Fresh is an advertising, promotional and quality grading program launched in 1984 to help farmers inform consumers about the availability and variety of fruits and vegetables grown in New Jersey. Through the many years of the program, consumers' awareness has increased, and it has become the benchmark for other states to initiate their own state-grown agricultural marketing programs."	http://jerseyfresh.nj.gov/
New Jersey Department of Agriculture	Jersey Grown	"Based on the popular and successful Jersey Fresh program, Jersey Grown is New Jersey's brand for locally grown plants, trees, shrubs and flowers, which certifies the item was grown in New Jersey so it is accustomed to the state's soil and growing conditions, checked for quality and is disease and pest-free."	http://www.jerseygrown.nj. gov/
New Jersey Department of Health	Commodity Supplemental Food Program (CSFP)	"The Commodity Supplemental Food Program (CSFP) in New Jersey works to improve the health of low-income seniors at least 60 years of age by supplementing their diets with nutritious United States Department of Agriculture (USDA) commodity foods."	http://www.state.nj.us/healt h/fhs/wic/senior- nutrition/commodity- supplementa/index.shtml
New Jersey Department of Health	Farmers' Market Nutrition Program (FMNP)	"The WIC Farmers' Market Nutrition Program (FMNP) is associated with the Special Supplemental Nutrition Program for Women, Infants and Children, popularly known as WIC. The WIC Program provides supplemental foods, health care referrals and nutrition education at no cost to low-income pregnant, breastfeeding and non-breastfeeding post-partum women, and to infants and children up to 5 years of age, who are found to be at nutritional risk."	https://www.fns.usda.gov/f mnp/wic-farmers-market- nutrition-program-fmnp

COORDINATING AGENCY	RELEVANT PROGRAM(S)	MISSION	WEBSITE
New Jersey Department of Health	New Jersey Health Information Network (NJHIN)	"The New Jersey Health Information Network (NJHIN) provides the infrastructure for electronic exchange of patient health information among Health Information Organizations and State health data sources. It also is the primary vehicle for New Jersey to eventually exchange health information nationally with the eHealth Exchange."	http://www.nj.gov/health/nj hit/network/
New Jersey Department of Health	Rural Health Advisory Committee	"To improve healthcare in New Jersey's rural areas by fostering available and accessible health services as well as partnering with other programs to leverage limited resources and expand collaborative partnerships locally, statewide, and nationally.	http://www.state.nj.us/healt h/fhs/primarycare/rural- health/
New Jersey Department of Health	Federally Qualified Health Centers	"The mission of the New Jersey's Federally Qualified Health Centers (FQHCs) deliver high quality health care to all people regardless of their ability to pay. To list a few, health centers provide a wide range of services."	http://nj.gov/health/fhs/pri marycare/fqhc/
New Jersey Department of Health	Diabetes Resource Coordination Centers (DRCC)	"The Diabetes Resource Coodination Centers promote diabetes self-management education (DSME) for New Jerseyans diagnosed with diabetes, as well as lifestyle intervention programs for residents at risk for type 2 diabetes."	http://nj.gov/health/fhs/chr onic/diabetes/
New Jersey Department of Health	Population Health Action Team	"Population health focuses on keeping healthy New Jerseyans well, preventing those at risk from getting sick, and keeping those with chronic conditions from getting sicker. Population health promotes prevention, wellness and equity in all environments, resulting in a healthy New Jersey."	http://www.nj.gov/health/p opulationhealth/index.shtm l
New Jersey Department of Health	State Nutrition Action Committee/Council	N/A	N/A
New Jersey Department of Health	Regional Chronic Disease Coalition of NJ	"A statewide strategic plan developed by the Task Force on Cancer Prevention, Early Detection and Treatment in New Jersey which aims to reduce the incidence, illness, and death due to cancer among New Jersey residents."	https://www.nj.gov/health/c cp/li.shtml

COORDINATING AGENCY	RELEVANT PROGRAM(S)	MISSION	WEBSITE
New Jersey Department of Human Services	Congregate Housing Services Program	"The State-funded Congregate Housing Services Program provides selected supportive services to low-income elderly persons or adults with disabilities, residing in certain subsidized housing facilities. The services offered include daily meals provided in a group setting, housekeeping, personal assistance, and service coordination. Service subsidies (comparable to rent subsidies) are available to assist tenants in certain income categories to meet the full cost of the program."	http://www.state.nj.us/hum anservices/doas/services/ch sp/
New Jersey Department of Human Services	Supplemental Security Income (SSI) Program	"The Federal Social Security Administration administers the Supplemental Security Income (SSI) Program, under which persons age 65 years and older, or those who are blind or disabled (including children), receive maintenance payments from that agency and supportive services (including emergency assistance and payment for burial) through the county welfare agencies."	http://www.nj.gov/humans ervices/dfd/programs/ssi/in dex.html
New Jersey Department of Human Services	Temporary Assistance to Needy Families (TANF)	"The state's welfare reform program, WorkFirst NJ, emphasizes work as the first step toward building a new life and a brighter future. Our goal is to help people get off welfare, secure employment and become self-sufficient, through job training, education and work activities. WFNJ provides temporary cash assistance and many other support services to families through the Temporary Assistance for Needy Families (TANF) program."	http://www.state.nj.us/hum anservices/dfd/programs/w orkfirstnj/
New Jersey Health Care Quality Institute	Mayors Wellness Challenge	"To undertake initiatives that promote system changes that ensure quality, safety, accountability and cost-containment as part of delivering health care services in New Jersey."	http://www.njhcqi.org/initi ative/mayors-wellness- campaign/
New Jersey Healthy Communities Network	Healthy Community Grants Program	"The New Jersey Healthy Communities Network (NJHCN) brings together local, regional and statewide leaders to support communities in developing healthy environments by fostering healthy eating and active living."	http://www.njhcn.org/abou t/
New Jersey Prevention Network	Coalition for a Healthy NJ	"The Coalition for a Healthy NJ supports public health efforts in order to prevent chronic diseases, promote healthier lifestyles, reduce health disparities and control health care spending by creating healthier communities across New Jersey and building capacity among professionals and community members."	http://chnj.njpn.org/

COORDINATING AGENCY	RELEVANT PROGRAM(S)	MISSION	WEBSITE
New Jersey Prevention Network	Get Active NJ	"To provide technical assistance, training and incentives to assist municipalities to find ways to educate stakeholders on different policies that can help promote walking and the many benefits that this can have on their communities."	http://www.njpn.org/initiati ves/get-active-nj/
New Jersey YMCA State Alliance	New Jersey Partnership for Healthy Kids	"The New Jersey Partnership for Healthy Kids (NJPHK) is focused on convening, connecting and empowering community partnerships across the state to help children achieve a healthy weight. NJPHK promotes policy and environmental changes that support healthy eating and increase opportunities for physical activity."	http://www.njhealthykids.o rg/
New Jersey YMCA State Alliance	Healthy U	"In 2008, The Horizon Foundation for New Jersey and the New Jersey YMCA State Alliance partnered in the development of Healthy U - a program aimed at preventing childhood obesity through improved nutrition, increased physical activity, and parental involvement."	http://www.njymca.org/mai n/healthy-u/
North Jersey Health Collaborative	North Jersey Health Collaborative	"Our core function is a shared process of community needs assessment and health improvement planning to identify the most pressing health issues and facilitate the development of collaborative action plans to address them."	http://www.njhealthmatters .org/
Produce for Better Health and Centers for Disease Control and Prevention	Fruits and Veggies More Matters	"We can help you eat more fruits & vegetables! Fruits & Veggies More Matters" is a health initiative focused on helping Americans increase fruit & vegetable consumption for better health."	http://www.fruitsandveggie smorematters.org/
Robert Wood Johnson Foundation	New Jersey Health Initiatives (Communities Moving to Action, BUILD Health Challenge, Next Generation Community Leaders)	"NJHI's mission mirrors that of the Robert Wood Johnson Foundation — to improve the health and health care of all Americans. NJHI does this by striving to build a Culture of Health in New Jersey that will enable all to live longer, healthier lives now and for generations to come."	http://www.njhi.org/

COORDINATING AGENCY	RELEVANT PROGRAM(S)	MISSION	WEBSITE
Rutgers University	Cooperative Extension	"Rutgers New Jersey Agricultural Experiment Station (NJAES) Cooperative Extension helps the diverse population of New Jersey adapt to a rapidly changing society and improve their lives and communities through an educational process that uses science based knowledge. Through science-based educational programs, Rutgers Cooperative Extension truly enhances the quality of life for residents of New Jersey and brings the wealth of knowledge of the state university to local communities."	https://njaes.rutgers.edu/ext ension/
Rutgers University	Food Institute at Rutgers: Center for Childhood Nutrition Education and Research	"The mission of the Center for Childhood Nutrition Education and Research (CCNER) is to improve the health of children through optimized nutrition, increased physical activity, and innovative, evidenced-based educational programs. This mission will be accomplished by executing a multidisciplinary program that integrates nutrition education, free play, and research to better understand how the culture of health can be improved and take steps at the state and national level to improve the health of children."	http://ifnh.rutgers.edu/cent ers/childhood-nutrition- education/
Rutgers University	New Jersey Safe Routes to School	"Empower and assist communities with identifying issues, creating partnerships and implementing projects and programs to encourage walking and biking to and from school as a safe, daily activity."	http://www.saferoutesnj.org
Sustainable Jersey	Municipal Certification Program	"The purpose of the Municipal Certification program is to empower communities to build a better world for future generations by providing them tools, trainings, and financial incentives to support communities as they pursue sustainability programs."	http://www.sustainablejerse y.com/
Sustainable Jersey	Schools Certification Program	"Sustainable Jersey for Schools is a certification program for New Jersey public schools that want to go green, conserve resources and take steps to create a brighter future. This program provides tools, training and financial incentives to support and reward schools as they pursue sustainability programs."	http://www.sustainablejerse yschools.com/