

# Policy: How can SNAP-Ed coordinate Type II Diabetes Prevention Education, Promotion and Support using Public Health Approaches?

## Introduction

In response to the reference to diabetes prevention activities in the Supplemental Nutrition Assistance Program Education (SNAP-Ed) Plan Guidance FY 2018 (<https://snaped.fns.usda.gov/snap/Guidance/FY2018SNAP-EdPlanGuidance.pdf>), CDPH SNAP-Ed has developed the following direction regarding the role of California SNAP-Ed sub-grantees in this capacity.

## Background and Context

The goal of SNAP-Ed is 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 (<http://health.gov/dietaryguidelines/2015/guidelines/>) and USDA food guidance with the focus on:*

1. Implementing strategies or interventions, among other health promotion efforts, to help the SNAP-Ed target audience establish healthy eating habits and a physically active lifestyle; and
2. Supporting primary prevention of diseases to help the SNAP-Ed target audience that has risk factors for nutrition-related chronic disease, such as obesity, to prevent or postpone the onset of disease by establishing healthier eating habits and being more physically active.

Obesity is strongly correlated with type 2 diabetes and other chronic diseases, including hypertension and cardiac disease. The FY 2017 SNAP-Ed Guidance identifies *Diabetes prevention education, promotion, and support that focuses on obesity prevention and is coordinated with multi-level interventions and/or public health approaches as an allowable cost* (pg. 82).

## The Role of SNAP-Ed in Diabetes Prevention

The Healthy Hunger-Free Kids Act, of 2010 (HHFKA), Sec.241, transformed SNAP-Ed into a Nutrition Education and Obesity Prevention Grant Program, explicitly adopting obesity prevention as a major emphasis and embracing comprehensive community-based and public health approaches. Because overweight and obesity are strongly correlated with type 2 diabetes and other chronic diseases, changes in eating and physical activity behaviors that improve weight status may reduce the incidence of these chronic diseases and as such, are within the realm of diabetes prevention.

Examples of appropriate SNAP-Ed interventions that align with primary prevention of diabetes include:

- Partnership with healthcare providers from qualified settings to promote and support SNAP-Ed work to encourage healthy food and beverage choices and physical activity behaviors:
  - Providers may send patients to SNAP-Ed classes that are aimed at the overall SNAP-Ed population to promote healthy food and beverage choices and regular physical activity.
  - Local health departments work with providers to establish “vegetable and/or physical activity/park prescriptions.”
- Healthy cooking classes
- Work with health care providers to incorporate nutrition and physical activity assessments into routine medical visits
- Store tours providing instruction on healthy shopping
- Rethink Your Drink (RYD) and infused water demonstrations
- Training and coordination of volunteer-led physical activity groups (e.g., walking clubs, Zumba™)
- Including statements within the context of SNAP-Ed approved education that healthy food and beverage choices and physical activity may prevent or delay type 2 diabetes

## National Diabetes Prevention Program

The Diabetes Prevention Program (DPP) (PDF, 193 KB), is a landmark study sponsored by the National Institutes of Health. This research study proved that type 2 diabetes could be prevented or delayed in persons with increased risk *by losing a small amount of weight* through getting 30 minutes of moderate-intensity physical activity, five days a week and a reduced fat, lower calorie diet. (<https://www.niddk.nih.gov/health-information/health-communication-programs/ndep/am-i-at-risk/take-small-steps/Pages/TakeSmallSteps.aspx>). In response, the Centers for Disease Control and Prevention (CDC) developed *The National Diabetes Prevention Program* (NDPP), a two-part lifestyle change program aimed at reducing diabetes risk through healthy eating, weight loss and exercise promotion. (<https://www.cdc.gov/diabetes/prevention/pdf/curriculum.pdf>)

Administration of the NDPP is NOT a qualified SNAP-Ed expense or activity for the following reasons:

I. The NDPP is not open to the general public so is not a population-based intervention. SNAP-Ed interventions are preventative and should not restrict access to individuals who have a specific diagnosis. Enrollment in the NDPP is restricted to:

1. Those 18 years of age and older who have a BMI of greater than or equal to 24. (greater than or equal to 22 if Asian).
2. A minimum of 50% of the class must have had a recent blood test showing a fasting glucose of 100 to 125 mg/dl. (or other equivalent measures).
3. A maximum of 50% of the class may participate if they screen positive for prediabetes based on the CDC Prediabetes Screening Test.

II. The NDPP requires on-going intervention, a review, and check-in on weekly progress, which includes private weigh-ins.

FY 2017 SNAP-Ed Guidance states that the following is unallowable:

*Weight loss classes specific to individuals, individualized meal plans, obesity treatment programs, etc. (pg. 81)*

As a result, the NDPP is an unallowable expense for two reasons:

1. The Program includes a weight loss class specific to individuals.
2. NDPP Lifestyle Coaches provide feedback on food intake logs to assist participants in behavior change and tracks weight change.

Medical nutrition therapy services such as those included in the NDPP are outside the scope of SNAP-Ed, and their cost is unallowable. According to the FY-2017 SNAP-Ed Guidance, medical nutrition therapy services include the assessment of the nutritional status of patients with a condition, illness, or injury (such as diabetes, hypertension, gout, etc.) that puts them at risk. This includes review and analysis of medical and diet history, laboratory values, and anthropometric measurements. Based on the assessment, nutrition modalities most appropriate to manage the condition or treat the illness or injury are chosen and include diet modification and counseling leading to the development of a personal diet plan to achieve nutritional goals and desired health outcomes.

*Allowable SNAP-Ed activities focus on primary prevention of disease.*

*Accordingly, they include activities to help the SNAP-Ed population to prevent or to postpone the onset of chronic disease by establishing more physically active lifestyles and healthier eating habits. By contrast, medical nutrition therapy is a secondary intervention that focuses on helping people already afflicted with the disease and its effects and on preventing additional disability.*

### Allowable

- Diabetes prevention education, promotion, and support that focuses on obesity prevention and is coordinated with multi-level interventions and/or public health approaches
- Store tours providing instruction on healthy shopping
- Nutrition education consistent with SNAP-Ed goals, such as RYD and infused water demonstrations and healthy cooking classes
- Training and coordination of volunteer-led physical activity groups ( e.g. Walking Clubs)
- Healthy Eating and Physical Activity Toolkit Classes
- Partnering with healthcare providers to leverage funds in meeting SNAP-Ed objectives
- Conducting individual or group educational sessions on achieving and maintaining a healthy body weight based on the Dietary Guidelines for Americans
- Simple measuring of height and weight by SNAP-Ed staff in determining BMI, as preparation for discussing the prevention or management of overweight and obesity
- Providing information on resources for further diabetes evaluation and support

### Unallowable

- Medical Nutrition Therapy Services
- National Diabetes Prevention Program
- Weight loss classes specific to individuals, individualized meal plans, obesity treatment programs, etc.
- Individualized meal plans
- Clinical health assessments including obtaining clinical data on members of the SNAP-Ed target audience. Such assessments include the measurement of cholesterol, blood glucose, or iron levels
- Materials with subject matter that is beyond the scope of SNAP-Ed, including the screening for diseases and the treatment and management of diseases