# RUTGERS Center for State Health Policy

A Unit of the Institute for Health, Health Care Policy and Aging Research

# Evaluation of the Faith in Prevention Initiative: Year 1 Report

Manisha Agrawal, M.P.H. Margaret Koller, M.S.



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# **Evaluation of the Faith in Prevention Initiative:** Year 1 Report

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### **Executive Summary**

Faithful Families Eating Smart and Moving More (FFESMM) uses a multi-level model that focuses on both individual behavior change and policy and environmental change within the faith community. As part of the Centers for Disease Control and Prevention's Preventive Health and Health Services Block Grant (PHHSBG) funding, the New Jersey Department of Health (NJDOH) piloted the Faith in Prevention Initiative in three cities: Camden, Newark, and Trenton. The NJDOH provided grants to the Camden Coalition of Healthcare Providers (CCHP), Greater Newark Healthcare Coalition (GNHC), and Trenton Health Team (THT) to expand the role of Faith-Based Organizations (FBOs) in the delivery of preventive health services in these communities. The goal of this initiative was to: 1) encourage the faith community to adopt policy and environmental changes that promote better health; 2) educate the faith community members about healthimproving life changes for better health; and 3) build partnerships between health care systems and faith-based organizations to improve health outcomes among congregants. For Year 1, each grantee received an award of \$300,000 for hiring dedicated program staff, and buying program materials, conducting trainings of lay leaders, and funding mini-grants to implement evidencebased strategies to effect policy, environmental, and behavioral change within the FBO. The connection between faith and physical health is an important aspect of FFESMM and was part of the key teachings of the participating FBOs. The curriculum is co-taught by health educators and trained lay leaders.

The NJDOH contracted with Rutgers Center for State Health Policy (CSHP) to assess the effectiveness of the program in changing individual behavior as well as practices and environments of faith communities. Two survey instruments were used to assess the implementation of the Faith in Prevention Initiative which utilize Faithful Families Eating Smart and Moving More (FFESMM) program: 1) pre/post Faith Community Assessment; and 2) pre/post Faithful Families Member Health and Interest Survey.

Overall, 26 FBOs in the three cities participated in the program. Among those who participated, 350 participants completed the pre-test, 290 completed the post-test, and 25 participants completed the three month post-test.

*Impact on FBOs:* All faith-based organizations had at least some health and wellness infrastructure in place and many reported developing new partnerships and programs and implementing changes to their nutrition and physical activity environment and policies for better health of their congregants. Participants shared interest in seeing their faith communities serving healthy meals and snacks and providing space as well as opportunities for members to be more physically active.

Impact on Participants: This focus on prevention and wellness had a positive impact on the participants. The data indicated better outcomes for most measures (increased knowledge and understanding, change in behavior for healthier eating and physical activity, and an improvement in faith community environment to support healthier lifestyle) in the post-test. Participation in the Faith in Prevention Initiative led to reported improvement in eating smaller portions, increasing consumption of fruits and vegetables, decreasing consumption of sugar sweetened beverages, planning weekly menus, preparing more meals at home, and spending more time doing physical activity. The pre/post differences were statistically significant (p < .05) for seven items in Camden (consumption of sugar-sweetened beverages, choosing healthier options and controlling portions to manage weight, trying to be more physically active, trying additional ways to be physically active such as using stairs or walk or bike to places, and changes in the faith community environment) and three items in Newark (consumption of fruits, planning weekly meals, and choosing healthier options and controlling portions to manage weight) indicating that the program did help participants change their eating and physical activity behavior. However, a pre/post comparison of participant data is not reported for Trenton because the questionnaires used for pre- and post-test were different from each other. The three month post data for Trenton affirm that participants maintained changes in healthy eating and physical activity behavior after three months following program completion.

Overall, the surveys show that the Faith in Prevention Initiative had a positive effect on both FBOs and members. The results are pivotal to participating FBOs and participants in Year 2 as it demonstrates that the intervention did help in building a culture of prevention and wellness for both the FBOs and the faith community members.

# **Evaluation of the Faith in Prevention Initiative:** Year 1 Report

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#### Introduction

Faithful Families Eating Smart and Moving More (FFESMM) is a "practice-tested intervention" that focuses on both individual behavior change and policy and environmental changes within the faith community. The FFESMM program, originally developed in North Carolina (http://www.faithfulfamiliesesmm.org/), is a multi-level programmatic intervention that involves the community in program design and provides opportunities to influence health behaviors at the individual, interpersonal, organizational, and community level. The FFESMM framework serves as a link between the faith community and local resources. It promotes healthy eating habits and increases physical activity through a series of group nutrition and physical activity education sessions. These sessions are designed to encourage the faith community to identify its needs (for supporting health and wellness of members) and adopt policy and environmental changes to meet those needs, and empowers the faith community members to make health-improving choices. These efforts address key factors such as physical inactivity and unhealthy eating that raise the risk of diseases. The lessons are co-taught by nutrition and physical activity educators and trained lay leaders from faith communities in small group sessions.

FFESMM can be adapted to any faith tradition. Promoting the connection between faith and health is important to the success of Faithful Families. Health messages from the faith community may have a greater impact on individuals as members may be more open to health messages received from faith community leaders. Families begin to consider how their physical health is connected to the faith they live out daily and help them in becoming advocates for policy and environmental changes that promote healthy eating and physical activity in their organization and in the community at large.

In 2014, the New Jersey Department of Health (NJDOH) received Prevention and Public Health Funds under the Preventive Health and Health Services Block Grant (PHHSBG) from the Centers for Disease Control and Prevention (CDC) for implementing community based primary prevention services. The Faith in Prevention Initiative, a pilot project under this grant, focused on: 1) recruiting faith-based organizations to participate in the pilot to implement changes in

environments and practices to support healthy eating and physical activity; and 2) changing individual behavior by giving them the information they need to Eat Smart and Move More. This is in line with the U.S. Department of Health and Human Services Healthy People 2020 objectives, specifically Educational and Community-Based Programs (ECBP) 10.7, 10.8, and 10.9, which call for an increase in the number of community-based organizations (including local health departments, Tribal health services, nongovernmental organizations, and State agencies) providing population-based primary prevention services in the areas of chronic disease, nutrition, and physical activity. The NJDOH contracted with Rutgers Center for State Health Policy (CSHP) to assess the effectiveness of the program in changing individual behavior as well as practices and environments of faith communities.

#### **Methods**

The NJDOH provided grants to Camden Coalition of Healthcare Providers (CCHP), Greater Newark Healthcare Coalition (GNHC), and Trenton Health Team (THT) to implement the Faith in Prevention Initiative utilizing the FFESMM curriculum within congregations in Camden, Newark, and Trenton respectively. Year 1 of the program was October 1, 2014—September 30, 2015. The evaluation design is a pre/post design with no comparison group. The existing FFESMM tools (as developed by the North Carolina Department of Health) were modified for the target population by CSHP with input from NJDOH. Two different types of data collection tools were used:

- Pre/post Faith Community Assessment Survey: provides information about the environment, policies, and practices in place to support healthy eating and physical activity in the participating faith community.
- Pre/post Faith in Prevention Member Health and Interest Survey (MHIS): helps determine the
  impact of the program on participants in making healthy food choices, planning meals, health
  beliefs, food safety and physical activity. (Note: Trenton Health Team used a different version
  of MHIS for pre-test and "Participant Survey" from the FFESMM curriculum for post-test. This
  prevented across-the-board analysis later in the report).

The grantees mailed/emailed the survey data to CSHP for data entry and analysis. All participant data were de-identified, and were analyzed using SPSS. This report includes comparison of frequencies of all survey items for participants completing pre-test (Camden = 131; Newark = 56) and post-test (Camden = 132; Newark = 36). It also includes comparison of frequencies of all survey items for participants completing both pre- and post-test (Camden = 71; Newark = 25). For Trenton (pre-test = 163; post-test = 122), a pre- post comparison of frequencies are not reported due to different versions of the form. A paired t-test of the matched sample was used to determine whether mean differences of all survey items before and after attending the sessions were statistically significant. In addition, two faith-based organizations (FBOs) in Trenton

collected three month post-test data. This report also includes pre- (N=22) and three month post-test (N=25) comparison of frequencies of all survey items from the two FBOs.

A human subjects protocol for the study was reviewed and approved by Rutgers University's Institutional Review Board (IRB).

#### **Results**

Overall, 26 FBOs in the three cities participated in the program. Among those who participated, 350 participants completed the pre-test, 290 completed the post-test, and 25 participants completed the three month post-test. Sections I to III contain detailed findings for each grantee:

- Section I: Camden Coalition of Healthcare Providers
- Section II: Greater Newark Healthcare Coalition
- Section III: Trenton Health Team

# Section 1: Camden Coalition of Healthcare Providers (CCHP)

#### **Data Collection**

CCHP submitted the following completed forms to CSHP for analysis. All participant data were de-identified and analyzed using SPSS.

#### **Data Sources**

- Faith Community Assessment: 9 FBOs completed both pre- and post-test.
- Member Health and Interest Survey: 131 participants completed the pre-test and 132 completed the post-test.

## **Summary Findings**

- Impact on FBOs: As a result of participation in this initiative, all FBOs made many changes to their health and wellness infrastructure, partnerships and programs, and physical activity and nutrition environment and policies. Overall, three FBOs implemented physical activity policies and five FBOs implemented policies for serving healthy meals. They may consider annually assessing their needs and priorities for improving their infrastructure, identifying additional partnerships, increasing opportunities for physical activity, and developing new nutrition policies and practices.
- Impact on Participants: Overall, the results indicate that participation in FFESMM sessions
  was associated with better outcomes for most measures (increase in knowledge and
  understanding of a healthier lifestyle, change in behavior for healthier eating and physical
  activity, increased skills to plan and eat more meals at home, and an improvement in faith
  community environment to support prevention and wellness).
  - Among matched participants, the pre/post differences were statistically significant for seven survey items: 1) consumption of sugar-sweetened beverages; 2) choosing healthier options and controlling portions to manage weight; 3) trying to be more physically active; 4) trying additional ways to be physically active (using stairs or walk or bike to places); and 5) changes in the faith community environment (healthy snacks, healthy meals, and places to be physically active).

# **Detailed Findings**

#### Faith Community Assessment (Pre/Post-test)

#### Key Findings and Recommendations

- Health/Wellness Infrastructure (see Tables 1 and 2 in Appendix A): The post-test score increased for six of the nine FBOs indicating an improvement in health and wellness infrastructure after implementing the curriculum. However, opportunities exist for participating faith-based organizations to including health as part of their mission statement, allocating budget for health related activities, periodically surveying members on health issues, establishing a health team or committee and appointing a person to be responsible for health related activities, and developing a lay health advisor program.
- Partnerships and Programs (see Tables 1 and 3 in Appendix A): Six of the nine FBOs improved their partnerships/collaborations and programs to support health and wellness of their community members. However, all FBOs may consider advancing their partnerships and programs, and annually offering health screenings (e.g., screening for blood pressure, blood cholesterol, blood sugar/diabetes, and healthy body weight) for their members.
- Physical Activity (see Table 1 and Tables 4–7 in Appendix A)
  - Environment: The post-test score increased for three of the nine FBOs. The participating FBOs may consider identifying additional ways for their members to be more physically active (e.g., exercise room, exercise equipment, walking trails, playgrounds, group classes).
  - o *Policies and Leadership:* Three FBOs implemented a policy to provide physical activity opportunities at meetings or functions. The leadership at two FBOs promoted physical activity in a public speech or sermon.
  - Group/Support Classes: The post-test score increased for one FBO and remained unchanged for five FBOs. FBOs may consider organizing additional group classes to increase and promote physical activity.
  - Individual Education/Information: The post-test score increased for seven of the nine FBOs indicating an increase in individual education programs offered by FBOs. The FBOs may also consider promoting physical activity on the faith community website, bulletin boards, posters, flyers, and newsletter.

#### Nutrition (see Table 1 and Tables 8–11 in Appendix A)

- Environment: The post-test scores remained unchanged for seven of the nine FBOs. The
  FBOs may consider improving the nutrition environment by developing a community
  garden onsite to improve access to fresh fruits and vegetables.
- o *Policies and Leadership:* The post-test score increased for six of the nine FBOs. Five FBOs implemented policies to serve healthier options for faith community meals. The leadership at three FBOs promoted nutrition in a public speech or sermon.
- o *Group Support/Classes:* Six of the nine FBOs showed improvement in their post-test scores indicating an increase in the number of group/support classes for the members.
- Individual Education/Information: The post-test score increased for five of the nine FBOs.
   All FBOs may consider identifying additional ways to promote and support nutrition and wellness of their members and promote nutrition on the faith community website.

#### Faith in Prevention Member Health and Interest Survey

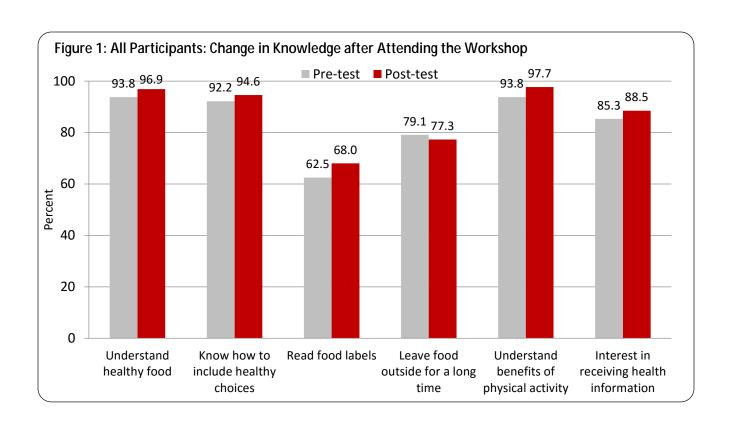
#### Demographics (see Tables 12 and 13 in Appendix A)

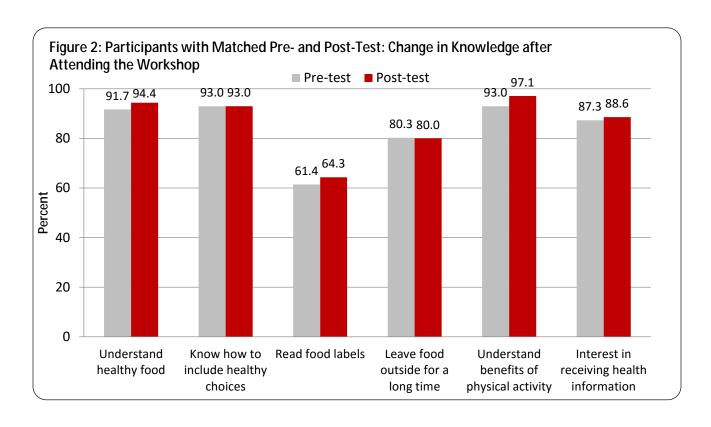
Overall, 131 participants completed the pre-test. Nearly nine out of ten participants (87.4%) were females, about three out of ten (29.1%) completed some college or vocational school, and one-fourth (25.2%) completed high school. About eight out of ten (80.2%) were non-Hispanics, and more than nine out of ten (95.1%) were Black or African-American. For household income, three out of ten (30.5%) reported their income to be between \$25,000 and \$49,999, one-fourth (25.2%) reported it to be between \$10,000 and \$24,999, and nearly one-fifth (18.3%) said that it is under \$10,000. Almost all participants (96.5%) said that their faith or spirituality is very important/important to their physical health.

#### Change in Knowledge (see Figures 1 and 2 below and Table 14 in Appendix A)

Overall, the participants reported an increase in understanding of five out of six survey items: healthy food choices, ways to include more fruits and vegetables in their diet, reading labels before buying food, benefits of physical activity for staying healthy, and interest in receiving health information that they can read, listen to or watch on their own after attending the sessions.

Among participants with matched pre- and post-test, the increase was mainly for understanding of healthy food choices (91.7% vs. 94.4%), reading food labels (61.4 vs. 64.3%), and understanding of benefits of physical activity (93.0% vs. 97.1%). A paired t-test for all six items indicated that the differences were not statistically significant (see Table 17 in Appendix A).

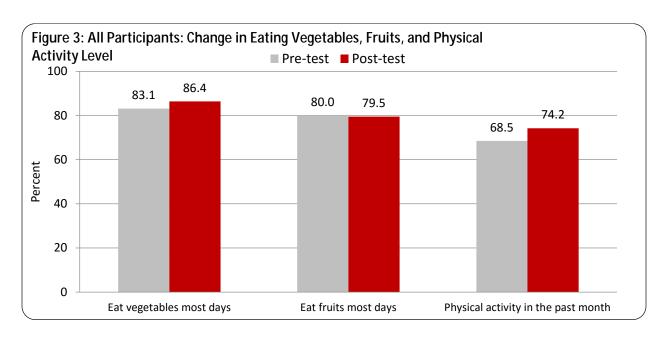


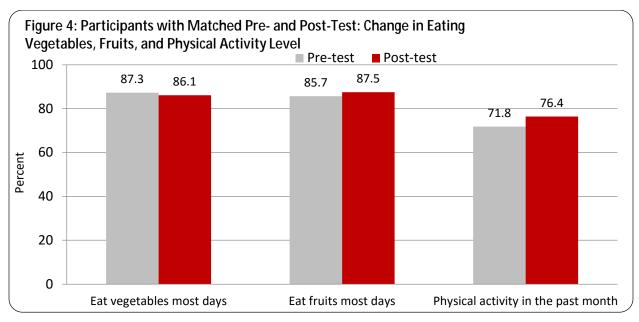


#### Change in Behavior (see Figures 3 and 4 below and Table 15 in Appendix A)

Overall, an increased percentage of participants reported eating vegetables on most days (83.1% vs. 86.4%) and participating in physical activities or exercises (68.5% vs. 74.2%) after attending the sessions.

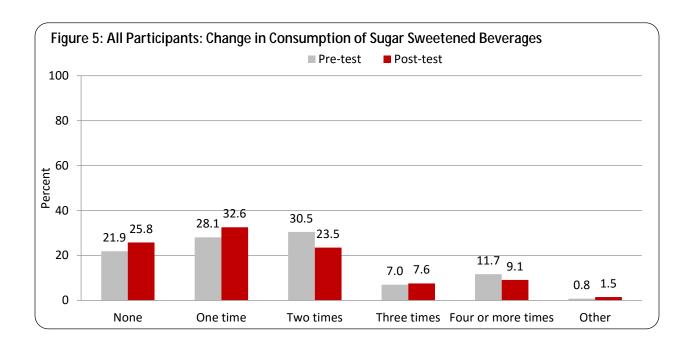
Among participants with matched pre- and post-test, a notable increase was seen in participation in physical activities or exercises (71.8% vs. 76.4%) after attending the session. A paired t-test indicated that the pre/post differences were not statistically significant (see Table 17 in Appendix A).

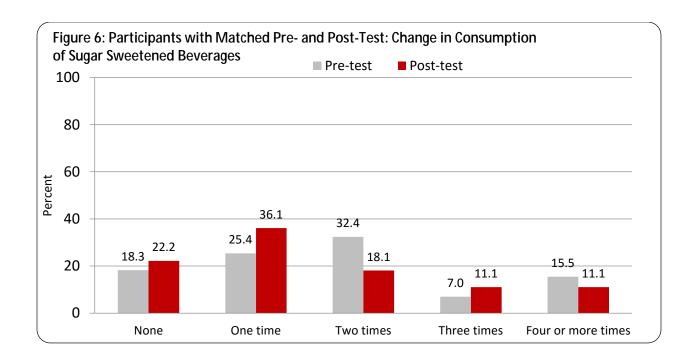




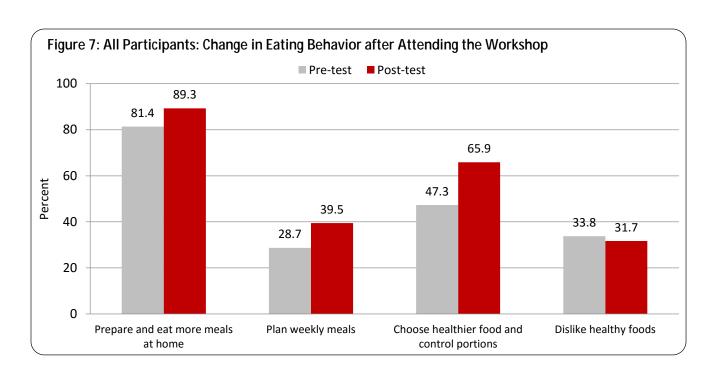
#### Nutrition (see Table 15 in Appendix A)

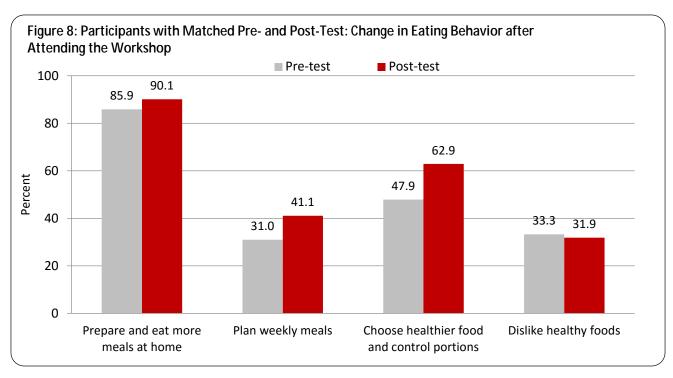
- Consumption of Sugar Sweetened Beverages (see Figures 5 and 6 below): The percentage of participants not drinking (21.9% vs. 25.8%) any sweetened beverages increased notably after attending the sessions. For other levels, the percentage decreased for two times per day (30.5% vs. 23.3%) or four or more times per day (11.7% vs. 9.1%).
  - Among participants with matched pre- and post-test, the data indicated a similar trend. A paired t-test indicated a statistically significant difference in the consumption of sugar sweetened beverages before (mean=1.8, SD=1.3) and after (mean=1.5, SD=1.3) attending the sessions; t(69)= -2.4, p = 0.02. These results suggest that the sessions helped participants in reducing consumption of sweetened beverages (see Table 17 in Appendix A).





- Planning and Preparing Meals (see Figures 7 and 8 below): The percentage of participants preparing and eating more meals at home (81.4% vs. 89.3%), planning weekly meals (28.7% vs. 39.5%), choosing healthier food options and controlling portion size (47.3% vs. 65.9%) increased markedly after attending the sessions.
  - The trend was similar among participants with matched pre- and post-test. A paired t-test indicated that the differences were statistically significant for choosing healthier options and controlling portion size to manage weight (pre-mean=2.1, SD=1.0; post-mean=2.3, SD=0.9; t(69)=3.0, p=0.00). These results suggest that the sessions made participants more mindful of what and how much they are eating (see Table 17 in Appendix A).

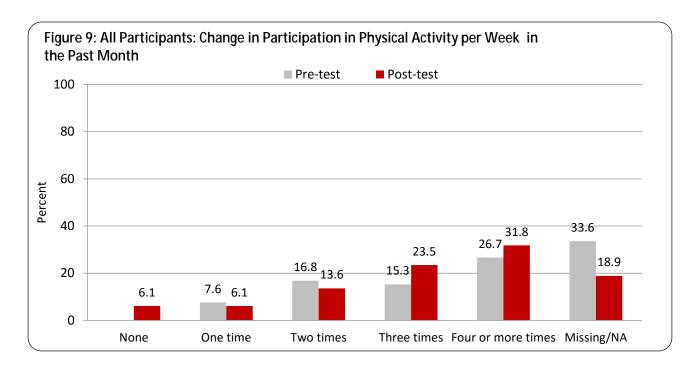


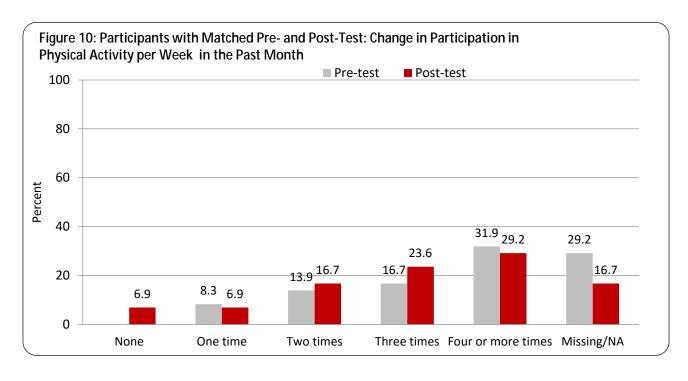


#### Physical Activity (see Table 15 in Appendix A)

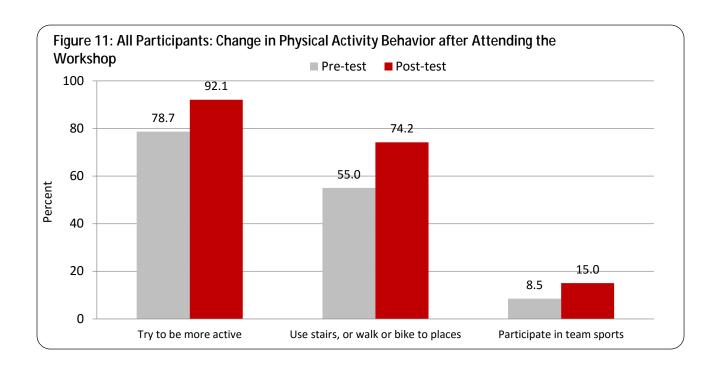
• Number of Times per Week (see Figures 9 and 10 below): The data illustrate a shift in trend as an increased percentage of participants reported more frequent participation in physical activity per week.

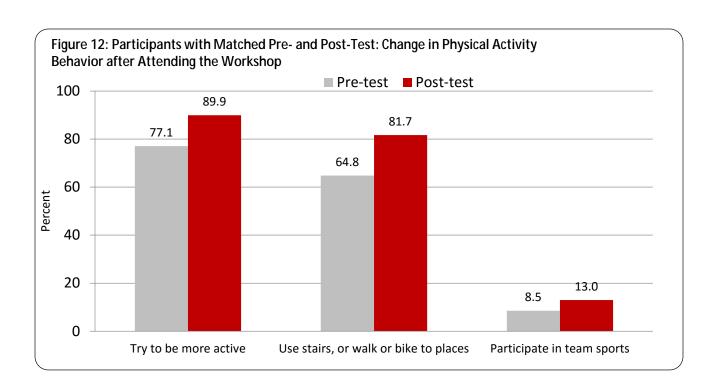
 Among participants with matched pre- and post-test, the percentage increased for two times per week (13.9% vs. 16.7%), and three times per week (16.7% vs. 23.6%) but decreased for four or more times per week (31.9% vs. 29.2%). However, the differences were not statistically significant (see Table 17 in Appendix A).





- Efforts to Increase Physical Activity Level (see Figures 11 and 12 below): The percentage increased markedly for all three survey items after attending the sessions: participants trying to be more physically active, using stairs instead of elevators or walking or biking instead of driving, and participating in team sports.
  - Among participants with matched pre- and post-test, the data indicated a similar trend. A paired t-test indicated that the differences were statistically significant for both trying to be more physically active (pre-mean=2.6, SD=0.8; post-mean=2.8, SD=0.5; t(68)= 3.0, p = 0.00); and using stairs or walking or biking to places (pre-mean=2.3, SD=0.9; post-mean=2.6, SD=0.8; t(70)= 3.7, p = 0.00). These results suggest that the sessions made participants more physically active, and helped them in identifying additional ways to increase their physical activity level (see Table 17 in Appendix A).

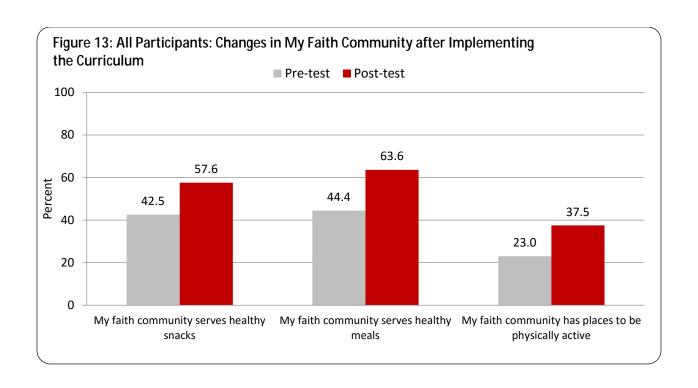


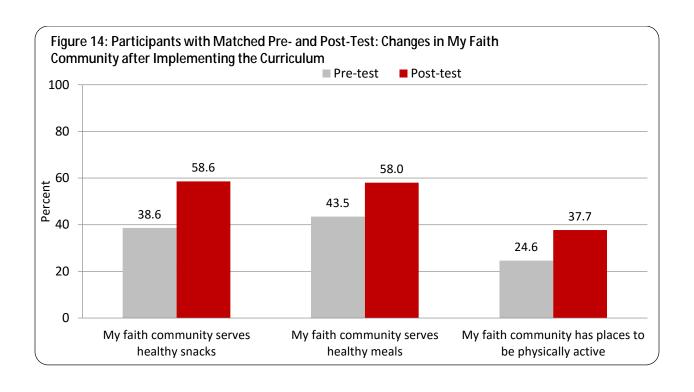


#### Change in My Faith Community (see Figures 13 and 14 below and Table 16 in Appendix A)

As a result of participation in the Faith in Prevention Initiative, an increased percentage of participants reported that their faith community serves healthy snacks (42.5% vs. 57.6%), serves healthy meals (44.4% vs. 63.6%), and has places (e.g., gym, playground, fitness room) available for members to be physically active (23.0% vs. 37.5%).

Among participants with matched pre- and post-test, the trend was similar and a paired t-test indicated that the differences were statistically significant for all three items: faith community serves healthy snacks (pre-mean=2.1, SD=0.8; post-mean=2.4, SD=0.8; t(68)=3.7, p=0.00); faith community serves healthy meals (pre-mean=2.1, SD=0.9; post-mean=2.4, SD=0.8; t(67)=2.6, p=0.01); and faith community has places available for members to be physically active (pre-mean=1.7, SD=0.9; post-mean=1.9, SD=0.9; t(67)=2.3, p=0.02). The results indicate that as a result of participation in this grant, the FBOs made changes to their nutrition and physical activity environment and policies to improve health and wellness of their members (see Table 17 in Appendix A).





# Section 2: Greater Newark Healthcare Coalition (GNHC)

#### **Data Collection**

GNHC submitted the following completed forms to CSHP for analysis. All participant data were de-identified and analyzed using SPSS.

#### **Data Sources**

- Faith Community Assessment: 7 FBOs completed the pre-test.
- Member Health and Interest Survey: 56 participants completed the pre-test and 36 completed the post-test.

# **Summary Findings**

- Impact on FBOs: All faith-based organizations had at least some health and wellness
  infrastructure in place. The leadership at almost all FBOs promoted physical activity and
  nutrition in a public speech/sermon in the past 12 months. Four of the seven FBOs had a
  policy in place to offer water for faith community meals. Opportunities were identified across
  all participating faith-based organizations to strengthen partnerships, survey members on
  health issues, sponsor health screenings, implement policies to support physical activity at
  meetings, increase opportunities for physical activity, and promote nutrition policies and
  practices.
- Impact on Participants: Overall, the results indicate that participation in FFESMM sessions
  was associated with better outcomes for most measures (increase in knowledge and
  understanding of a healthier lifestyle, change in behavior for healthier eating and physical
  activity, increased skills to plan and eat more meals at home, and an improvement in faith
  community environment to support prevention and wellness).
  - Among matched participants, the pre/post differences were statistically significant for three survey items: 1) eating fruits on most days; 2) choosing healthier options and controlling portions to manage weight; and 3) planning weekly meals.

## **Detailed Findings**

#### Faith Community Assessment (Pre/Post-test)

#### Key Findings and Recommendations (see Tables 1 and 2 in Appendix B)

- Health/Wellness Infrastructure: All seven FBOs reported appointing a person for all health related activities, and six of the seven FBOs established a health team or committee for their members. However, opportunities exist across all participating faith-based organizations to allocate a budget for health related activities, periodically survey members on health issues, and develop a lay health advisor program.
- Partnerships and Programs: Six of the seven FBOs developed and/or had existing partnerships with another health, health promotion, or human services agency. Five of the seven FBOs sponsored blood pressure screenings, and four FBOs sponsored a healthy body weight screening in the past 12 months. All FBOs may consider strengthening their partnerships and programs, and periodically offering/organizing health screenings (e.g., screening for blood pressure, blood cholesterol, blood sugar/diabetes, and healthy body weight) for their members.
- Physical Activity: All seven FBOs reported that the leadership promoted physical activity in a
  public speech in the past 12 months. However, all FBOs may consider identifying additional
  ways for their members to be more physically active (e.g., exercise room, exercise equipment,
  walking trials, playgrounds, fitness guides, group classes), developing policies for supporting
  physical activity opportunities at meetings or functions, and promoting physical activity
  through posted information, bulletins, and on their website.
- Nutrition: Six of the seven FBOs have a kitchen or place to prepare meals for the members, and their leadership promoted nutrition in a public speech/sermon in the past 12 months. Four of the seven FBOs had a policy in place to offer water for faith community meals, serve healthy foods at food events, offer weight loss support groups, and promote nutrition in bulletin, programs or newsletters. However, all FBOs may consider developing a community garden for their members, offering group classes to teach healthy cooking, organizing weight loss support groups, developing guidelines to offer healthier options for faith community meals, and finding additional ways to promote and support nutrition and wellness of their members.

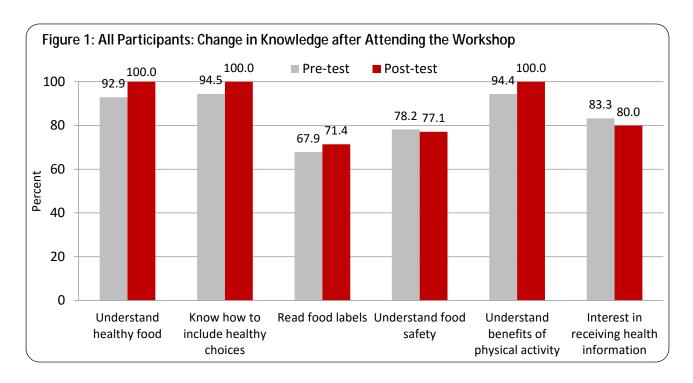
#### Faith in Prevention Member Health and Interest Survey

#### Demographics (Tables 3 and 4 in Appendix B)

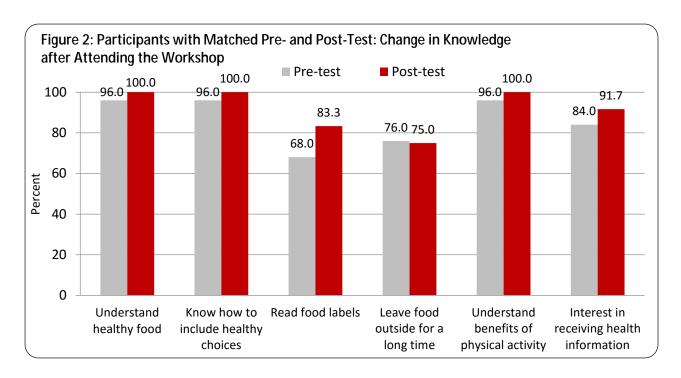
Overall, 56 participants completed the pre-test. More than nine out of ten participants (94.5%) were females, about three out of ten (29.1%) completed some college or vocational school, and nearly one-fifth (18.2%) completed four years of college. More than two-thirds (69.6%) were non-Hispanics, and 92.7% were Black or African-American. For household income, a little less than one-fourth (23.2%) said that their income is between \$50,000 and \$74,000, and 21.4% said that it is between \$25,000 and \$49,999. Almost all participants (98.1%) said that faith or spirituality is very important/important to their physical health.

#### Change in Knowledge (see Figures 1 and 2 below and Table 5 in Appendix B)

Overall, participants reported a notable increase in understanding of: healthy food choices (92.9% vs. 100.0%), ways to include more fruits and vegetables in their diet (94.5% vs. 100.0%), how to read labels before buying food (67.9% vs. 71.4%), and benefits of physical activity for staying healthy (94.4% vs. 100.0%) after attending the sessions. However, participants shared a little lesser interest (83.3% vs. 80.0%) in receiving health information that they can read, listen or watch on their own.



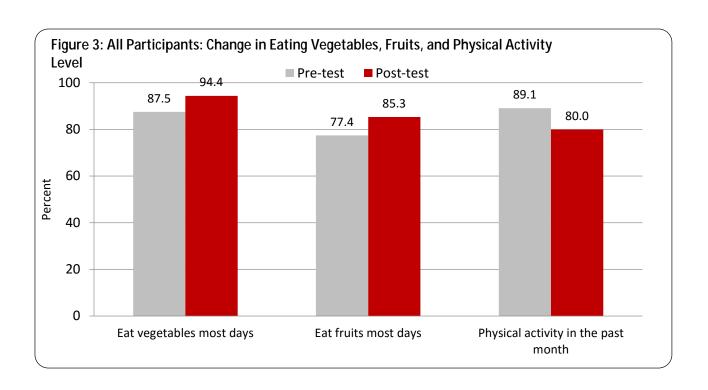
Among participants with matched pre- and post-test, the data showed a similar trend. However, there was a notable increase in the percentage of participants (84.0% vs. 91.7%) interested in receiving health information that they can read, listen, or watch on their own. A paired t-test for all six items indicated that the differences were not statistically significant (see Table 8 in Appendix B).

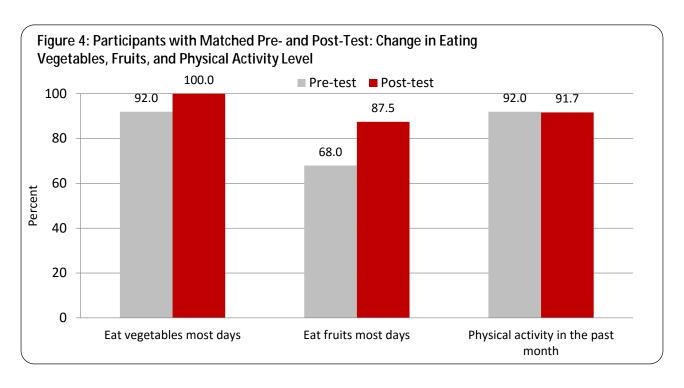


#### Change in Behavior (see Figures 3 and 4 below and Table 6 in Appendix B)

Overall, an increased percentage of participants reported eating vegetables (87.5% vs. 94.4%) and fruits (77.4% vs. 85.3%) on most days. However, the percentage of participants participating in physical activities or exercises in the past month decreased (89.1% vs. 80.0%) after attending the sessions.

Among participants with matched pre- and post-test, the increase was more noticeable for fruits consumption (68.0% vs. 87.5%). In addition, the percentage of participants participating in physical activities or exercises remained same (92.0% vs. 91.7%) after attending the sessions. A paired t-test indicated a significant difference in the consumption of fruits before (mean=2.4, SD=0.9) and after (mean=2.6, SD=0.7) attending the sessions; t(23) = 2.4, p = 0.03. These results suggest that the sessions did have a positive impact on the fruits consumption behavior of participants (see Table 8 in Appendix B).



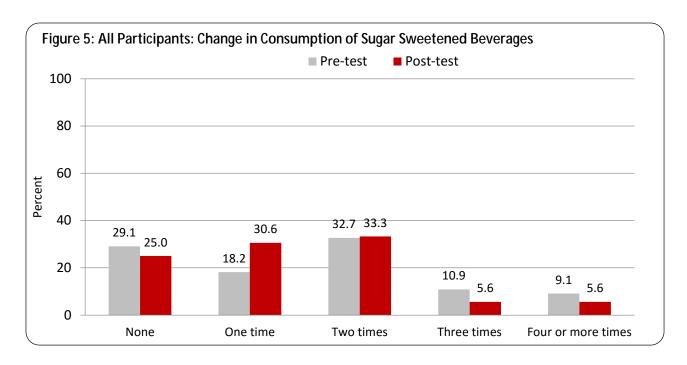


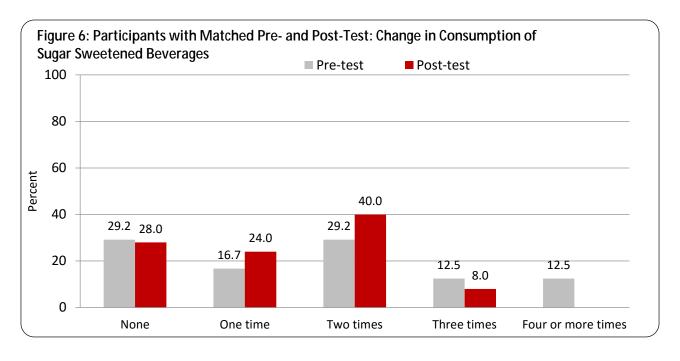
#### Nutrition (see Table 6 in Appendix B)

• Consumption of Sugar Sweetened Beverages (see Figures 5 and 6 below): Overall, the percentage of participants not drinking (29.1% vs. 25.0%) any sweetened beverages decreased after attending the sessions. For other levels, the percentages also decreased for

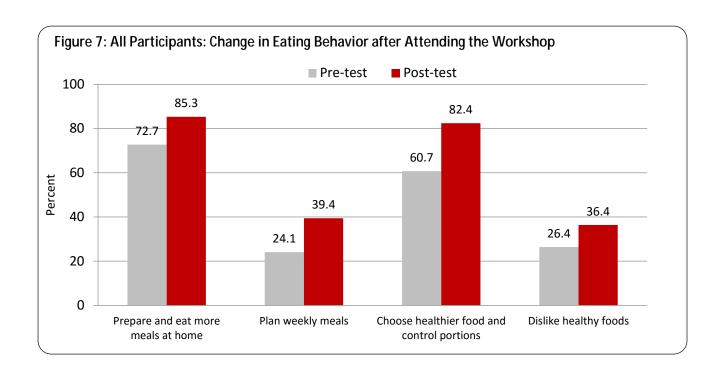
three times a day (10.9% vs. 5.6%) as well as four or more times a day (9.1% vs. 5.6%) but increased notably for once a day (18.2% vs. 30.6%).

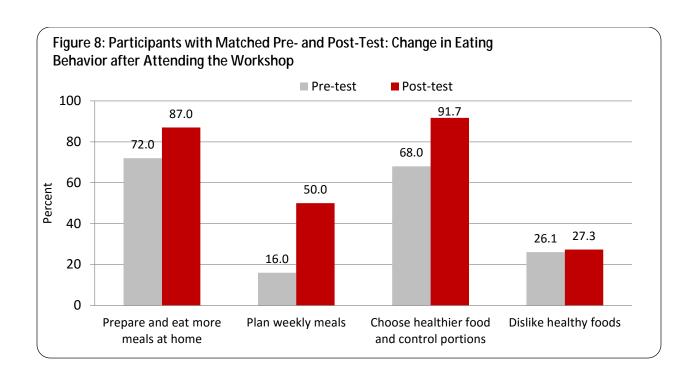
Among participants with matched pre- and post-test, the increase was for both once (16.7% vs. 24.0%) as well as twice (29.2% vs. 40.0%) a day. However, no participant reported drinking sugar sweetened beverages four or more times a day after attending the sessions. A paired t-test indicated that the pre/post differences were not statistically significant.





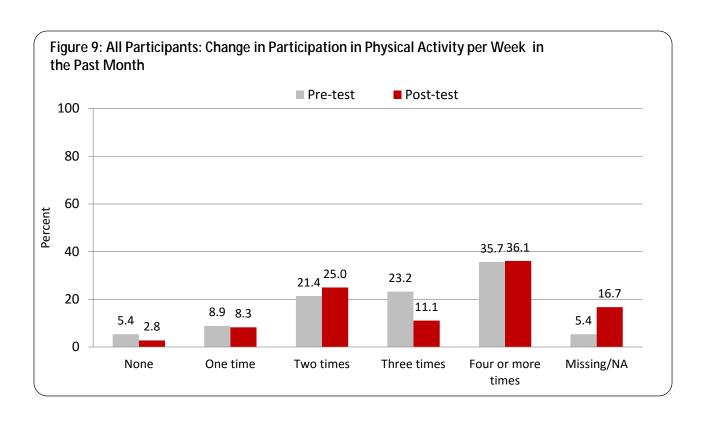
- Planning and Preparing Meals (see Figures 7 and 8 below): Overall, the percentage of participants preparing and eating more meals at home (72.7% vs. 85.3%), planning weekly meals (24.1% vs. 39.4%), choosing healthier food options and controlling portion size (47.3% vs. 65.9%) increased markedly after attending the sessions.
  - o Among participants with matched pre- and post-test, the data indicated a similar trend and the increase was more prominent for planning weekly meals (16.0% vs. 50.0%) as well as choosing healthier options and controlling portions (68.0% vs. 91.7%). A paired t-test indicated that the differences were statistically significant for both planning weekly meals (pre-mean=1.4, SD=0.8; post-mean=2.0, SD=1.0; t(21)= 3.4, *p* = 0.00) and choosing healthier options and controlling portions (pre-mean=2.4, SD=0.9; post-mean=2.8, SD=0.6; t(23)= 2.6, *p* = 0.02). These results suggest that the sessions helped participants in planning their weekly menu and made them more mindful of what and how much they are eating (see Table 8 in Appendix B).

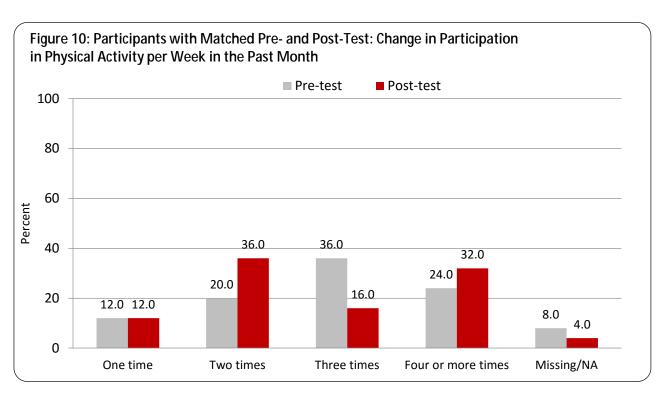




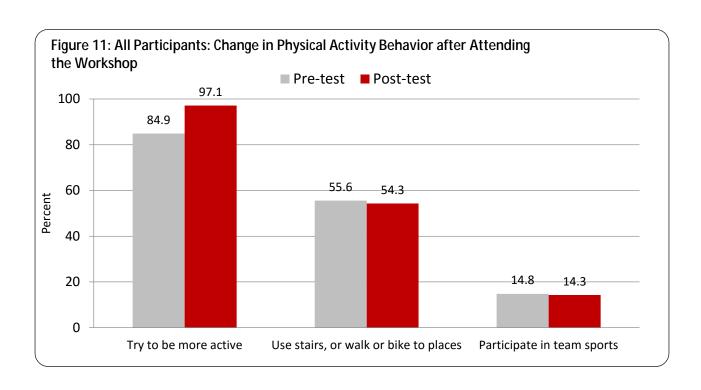
#### Physical Activity (see Table 6 in Appendix B)

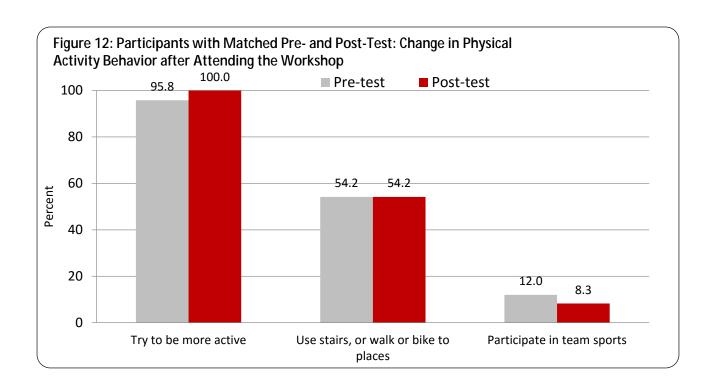
- Number of Times per Week (see Figures 9 and 10 below): The percentage of participants not participating in any physical activity decreased slightly (5.4% vs. 2.8%) after attending the sessions. For other frequencies, the percentage increased for two times per week (21.4% vs. 25.0%) but decreased for three times per week (23.2% vs. 11.1%).
  - Among participants with matched pre- and post-test, the percentage increased for two times per week (20.0% vs. 36.0%), and four or more times per week (24.0% vs. 32.0%) but decreased for three times per week (36.0% vs. 16.0%). However, the differences were not statistically significant.





- Efforts to Increase Physical Activity Level (see Figures 11 and 12 below): Overall, the percentage of participants trying to be more physically active (84.9% vs. 97.1%) increased markedly after attending the sessions. However, there was no change in the percentage of participants trying to increase their physical activity level in specific ways such as using stairs or walking or biking to places (55.6% vs. 54.5%) and participating in team sports (14.8% vs. 14.3%).
  - Among participants with matched pre- and post-test, there was a small increase in the percentage trying to be more physically active (95.8%% vs. 100.0%) and decrease in participation in team sports (12.0% vs. 8.3%) after attending the sessions. However, the differences were not statistically significant.

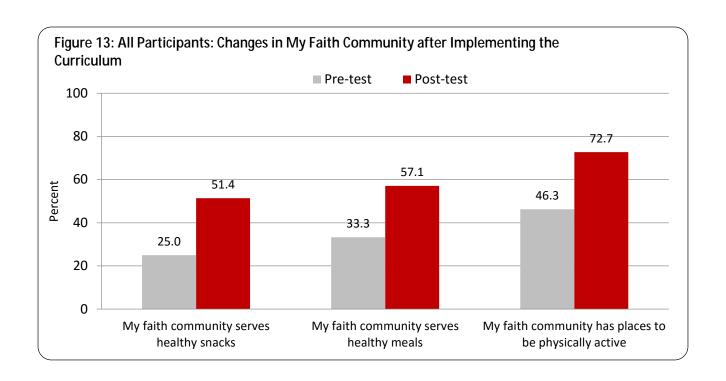


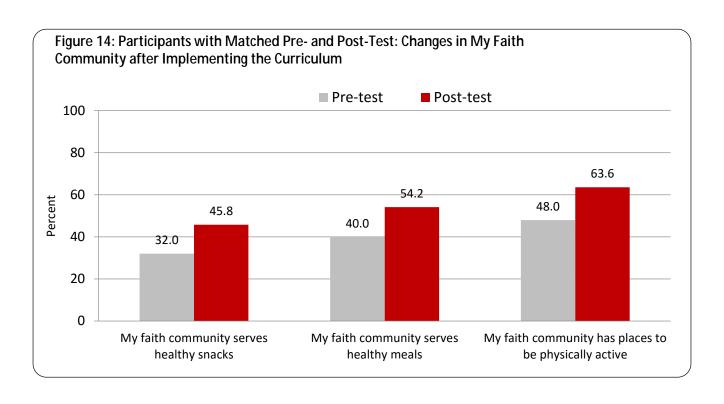


#### Change in My Faith Community (see Figures 13 and 14 below and Table 7 in Appendix B)

As a result of participation in the Faith in Prevention Initiative, an increased percentage of participants reported that their faith community serves healthy snacks (25.0% vs. 51.4%), serves healthy meals (33.3% vs. 57.1%), and has places (e.g., gym, playground, fitness room) available for members to be physically active (46.3% vs. 72.7%).

 Among participants with matched pre- and post-test, the data indicated a similar trend for all three survey items. However, the differences were not statistically significant.





# Section 3: Trenton Health Team (THT)

#### **Data Collection**

THT submitted the following completed forms to CSHP for analysis. All participant data were deidentified, and analyzed using SPSS.

#### **Data Sources**

- Faith Community Assessment: 10 faith-based organizations (FBOs) completed the pre-test and 8 FBOs completed the post-test.
- Eat Smart, Move More Member Health and Interest Survey: 163 participants completed the survey.
- Participant Survey: 122 participants completed the survey. In addition, 9 completed the Spanish version of pre-test for post-test.
- Three month Post-test: 25 participants from 2 FBOs completed the survey.

## **Summary Findings**

- Impact on FBOs: As a result of participation in this initiative, all FBOs made many changes to their health and wellness infrastructure, partnerships and programs, and physical activity and nutrition environment and policies. Overall, two FBOs implemented physical activity policies and four FBOs implemented policies for serving healthy meals. They may consider completing this tool annually to identify their needs and priorities for improving their infrastructure, identifying additional partnerships, increasing opportunities for physical activity, and developing new nutrition policies and practices.
- Impact on Participants: Overall, the majority of participants shared interest in learning about healthy food choices, portion sizes, benefits of physical activity, and increasing their physical activity level. Participants also shared a strong interest in seeing policy and environmental changes in their faith community (healthy snacks, healthy meals, places to be physically active, and regular classes offered on healthy eating or physical activity).
  - The post-test shows that the FFESMM sessions made nearly eight out of ten participants mindful of their diet and getting physical activity every day. More than 60% of participants reported improvement in eating smaller portions, increasing

- consumption of fruits and vegetables, drinking fewer calorie containing beverages, preparing more meals at home, and participation in physical activities.
- The three month post-test results support a long-term impact of the program. Participants indicated a continued interest in learning about healthy eating three months after completing the six week FFESMM sessions. Overall, a notable increase in consumption of fruits and vegetables was seen in the three month post-test. A decreased percentage of participants shared interest in seeing healthy meals served for the faith community meals in the three month post-test. However, an increased percentage of participants reported interest in seeing their leaders talk about healthy eating and physical activity in sermons, messages or other talks, and their faith community regularly offering classes on physical activity or healthy eating.

# **Detailed Findings**

#### Faith Community Assessment (Pre/Post-test)

#### **Key Findings and Recommendations**

#### Health/Wellness Infrastructure (see Tables 1 and 2 in Appendix C)

The post-test score increased for three of the ten FBOs indicating an improvement in health and wellness infrastructure after implementing the curriculum. However, opportunities exist for participating faith-based organizations to sponsor health fairs for members, establish a health team or committee, and appoint a person to be responsible for health related activities.

#### Physical Activity (see Tables 1, 3 and 4 in Appendix C)

- Policies and Environment: The post-test score increased for eight of the ten FBOs. Six FBOs made changes to their environment for their members to be more physically active (e.g., exercise room, exercise equipment, walking trails, playgrounds, group classes), and two FBOs implemented policies for supporting physical activity opportunities at meetings or functions.
- *Programs and Education:* The post-test score increased for six of the ten FBOs. This indicates that FBOs may consider organizing additional group classes for increasing and promoting physical activity. They may also consider promoting physical activity through posted information, bulletins, and newsletters.

#### Nutrition (see Tables 1, 5 and 6 in Appendix C)

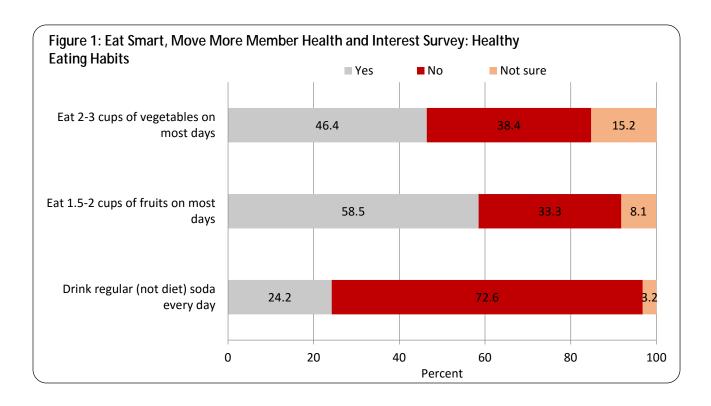
 Policies and Environment: The post-test scores increased for four FBOs and remained unchanged for four FBOs. Three FBOs developed a community garden and four FBOs implemented policies to offer healthier options for faith community meals. The FBOs may consider developing a community garden with the help of the members, supporting healthier

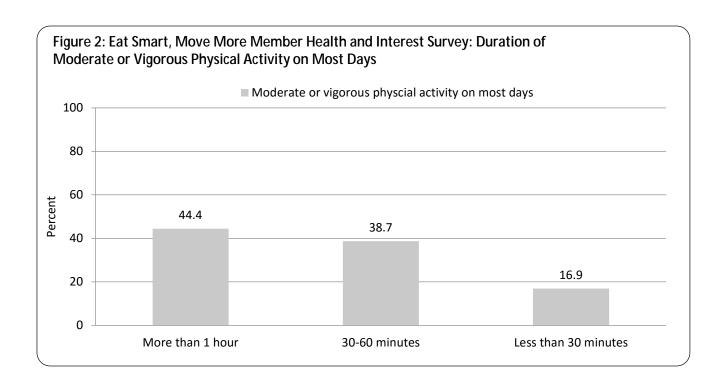
- meal preparation, and developing guidelines to offer healthier options for faith community meals.
- *Programs and Education:* The post-test score increased for seven of the ten FBOs. This indicates that FBOs may consider identifying additional ways such as group/support classes to promote and support nutrition and wellness of their members.

#### Eat Smart, Move More Member Health and Interest Survey

# Healthy Eating and Physical Activity Habits (see Figures 1 and 2 below and Table 7 in Appendix C)

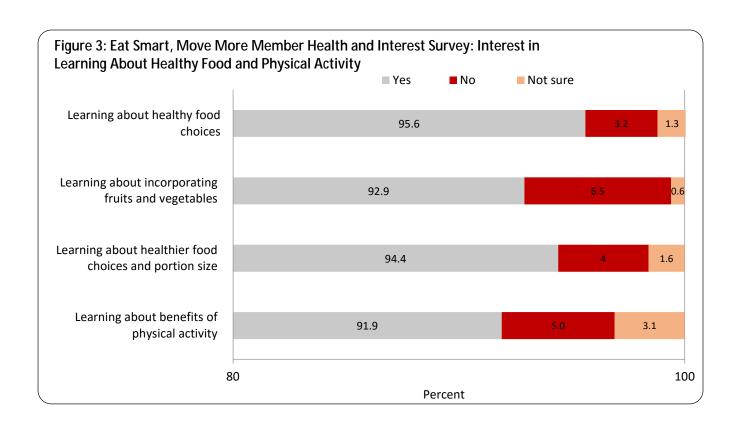
- A little less than half (46.4%) of participants reported eating two—three cups of vegetables on most days and nearly six out of ten (58.5%) reported eating one and half—two cups of fruits on most days.
- More than seven out of ten (72.6%) reported not drinking regular soda every day.
- More than eight out of ten (83.1%) reported doing 30 or more minutes of moderate or vigorous physical activity in addition to their normal routine on most days.

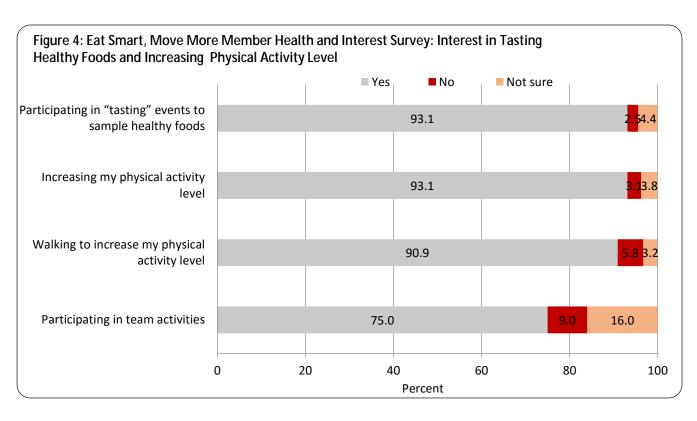




# Interest in Learning about Eating Healthy and Physical Activity (see Figures 3 and 4 below and Table 8 in Appendix C)

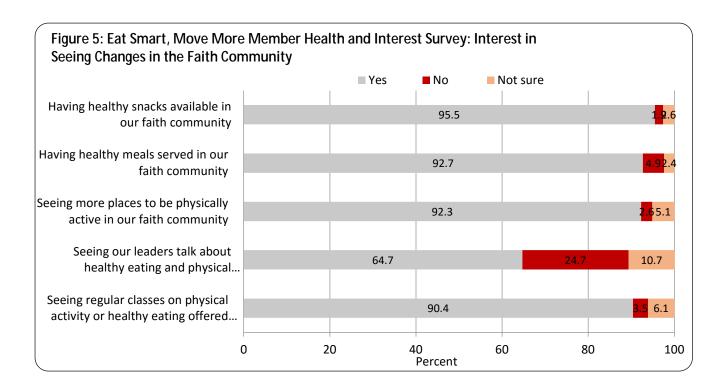
- More than nine out of ten participants (>90%) shared interest in learning about healthy food choices, incorporating fruits and vegetables into their diet, portion size, benefits of physical activity, and Increasing physical activity level.
- Three-fourths (75.0%) shared interest in participating in team activities.





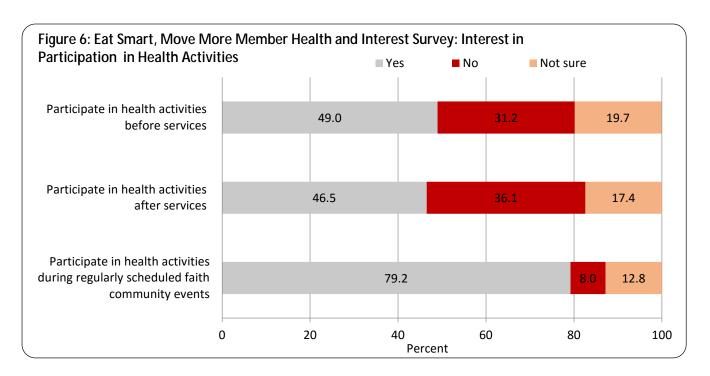
# Interest in Seeing Changes in the Faith Community (see Figure 5 below and Table 9 in Appendix C)

- Participants shared a strong interest in seeing policy and environmental changes, such as availability of healthy snacks (95.5%), healthy meals (92.7%), and more places to be physically active (92.3%) implemented in their faith community.
- Nearly two-thirds (64.7%) said that they would like their leader to talk about healthy eating and physical activity in sermons, messages, or other talks.
- About nine out of ten (90.4%) reported that they would like their faith community to regularly offer physical activity or healthy eating classes.



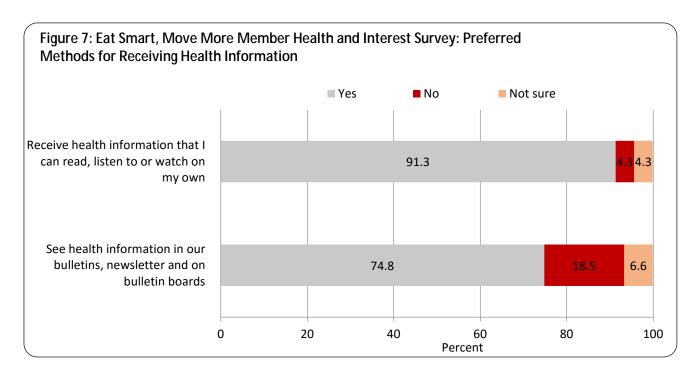
#### Interest in Participation in Health Activities (see Figure 6 below and Table 10 in Appendix C)

- Nearly five out of ten (49.0%) participants reported that they would like to participate in health activities before services, and 46.5% said that they would like to participate after services.
- About eight out of ten (79.2%) shared interest in participating in health activities like physical activity breaks or healthy food tastings during regularly scheduled faith community events.



## Preferred Methods for Receiving Health Information (see Figure 7 below and Table 11 in Appendix C)

- More than nine out of ten (91.3%) said that they would like to receive health information that they can read, listen to, or watch on their own.
- Nearly three-fourths (74.8%) said that they would like to see health information in bulletins, newsletters, and on bulletin boards.



### Participant Survey

#### Demographics (see Table 12 in Appendix C)

- Overall, 122 participants completed this survey and nine participants completed the Spanish version of pre-test for post-test.
- Nearly eight out of ten (77.7%) participants were female.
- About one-third (33.7%) were aged 55 or older. However, 14.7% were under 25 years of age.
- More than half (51.7%) of the participants were African American, nearly one-third (31.7%) were Hispanic/Latino, and the rest were White (6.7%), American Indian (0.8%) or Other (4.2%). Moreover, 4.9% of participants reported more than one race.

#### Program Effect (see Figures 8 and 9 below and Table 13 in Appendix C)

As a result of participation in this program, participants reported improvements in the following areas:

#### Nutrition

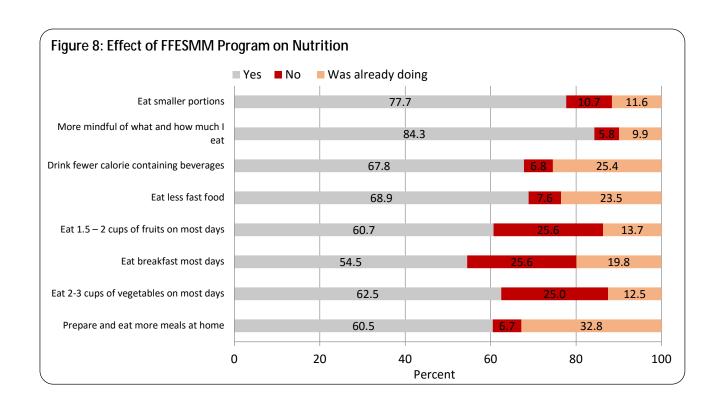
- More than eight out of ten (84.3%) reported that they are now mindful of their diet, and more than three-fourths (78.3%) said that they are more mindful of getting physical activity every day.
- More than three-fourths (77.7%) reported controlling portion sizes, and more than two-thirds reported eating less fast food (68.9%) and drinking fewer calorie containing beverages (67.8).
- About six out of ten reported preparing and eating more meals at home (60.5%), and eating two-three cups of vegetables (62.5%), and one and a half-two cups of fruits (60.7%) on most days. However, one-fourth participants reported not eating two-three cups of vegetables (25.0%) and one a half-two cups of fruits (25.6%).

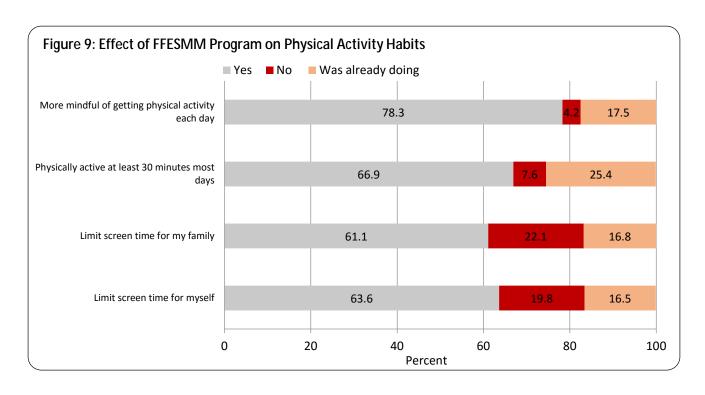
#### Physical Activity

 As a result of participating in this program, more than two-thirds (66.9%) reported doing at least 30 minutes of physical activity on most days.

#### Screen Time

 More than six out of ten reported limiting screen time for themselves (63.6%) as well as their family (61.1%).



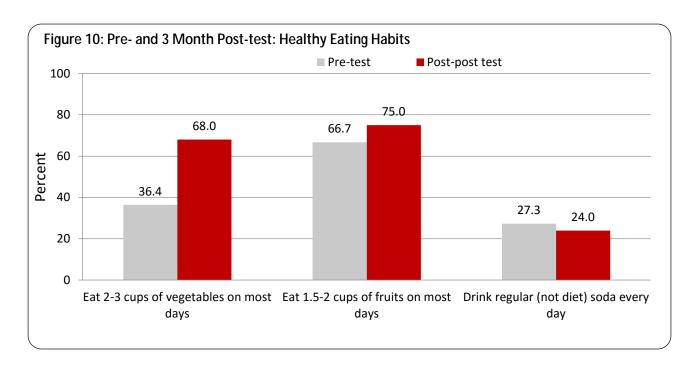


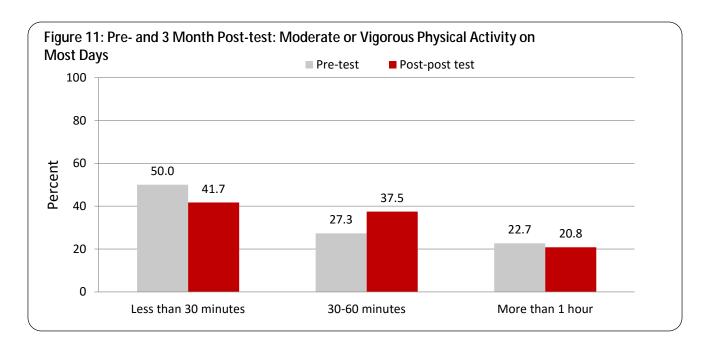
## Eat Smart, Move More Member Health and Interest Survey Pre- and Three Month Post-test

Two FBOs collected three month post-test data. The analysis below compares pre- (N = 22) and three month post-test (N = 25) of two FBOs.

## Healthy Eating and Physical Activity Habits (see Figures 10 and 11 below and Table 14 in Appendix C)

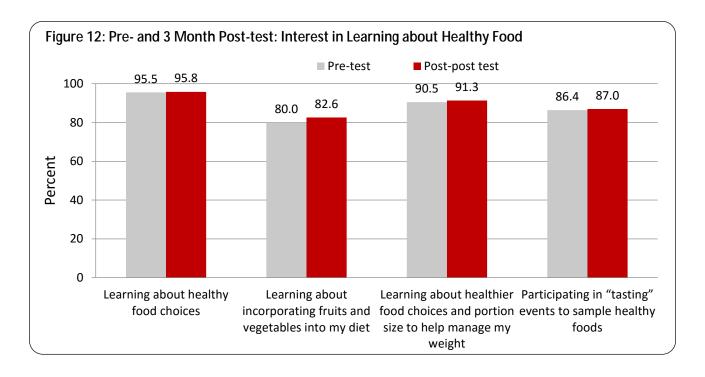
- Overall, the participants reported a notable increase in consumption of two–three cups of vegetables (36.4% vs. 68.0%) and one a half–two cups of fruits (66.7% vs. 75.0%) on most days in the three month post-test.
- The percentage of participants drinking regular soda (27.3 vs. 24.0) decreased in the three month post-test.
- For physical activity, the percentage increased for participants spending 30–60 minutes (27.3% vs. 37.5%) in moderate or vigorous physical activity on most days in addition to their normal routine.

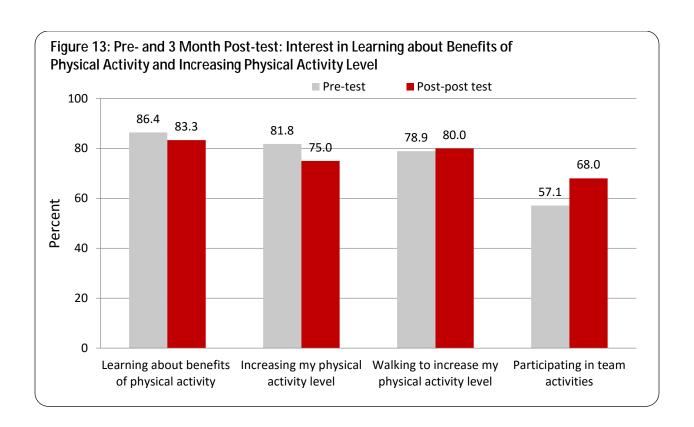




Interest in Learning about Eating Healthy and Physical Activity (see Figures 12 and 13 below and Table 15 in Appendix C)

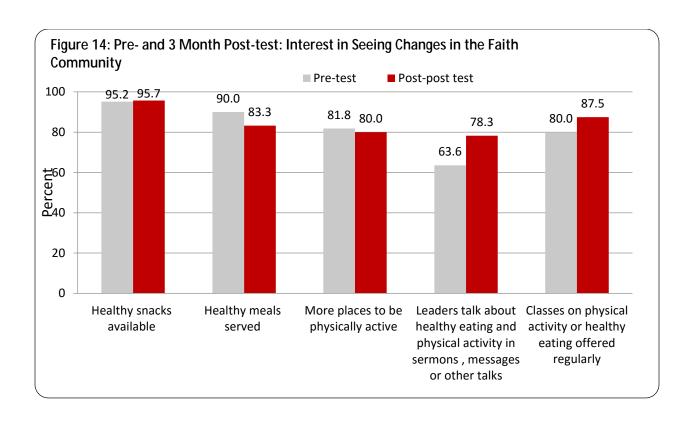
- The data indicated a consistent interest in learning about healthy eating and portion size three months after completing the sessions.
- For physical activity, participants shared a little lesser interest in learning about benefits of physical activity (86.4% vs. 83.3%), and increasing their physical activity level (81.8% vs. 75.0%), and more interest in participating in team activities (57.1% vs. 68.0%).





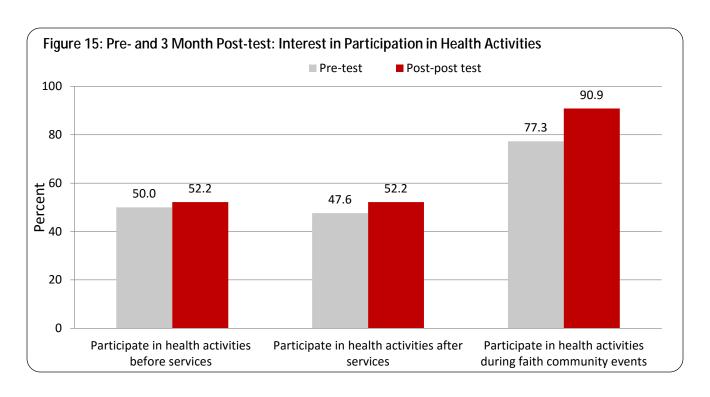
# Interest in Seeing Changes in the Faith Community (see Figure 14 below and Table 16 in Appendix C)

• The interest in seeing healthy meals served for the faith community meals decreased in the three month post-test (90.0% vs. 83.3%). However, an increase was seen in the percentage of participants interested in seeing their leaders talk about healthy eating and physical activity in sermons, messages or other talks (63.6% vs. 78.3%), and their faith community regularly offering classes on physical activity or healthy eating (80.0% vs. 87.5%).



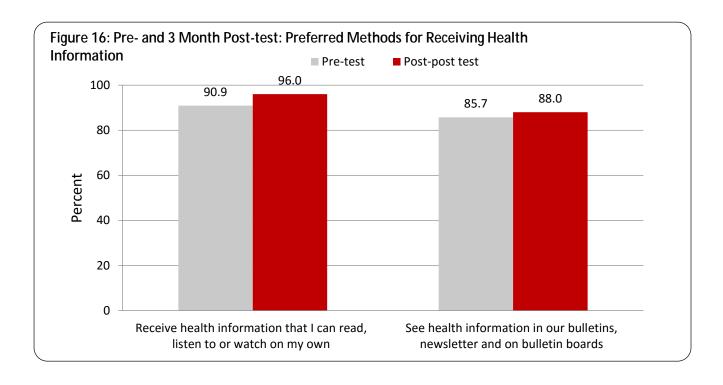
#### Interest in Participation in Health Activities (see Figure 15 below and Table 17 in Appendix C)

There was a slight increase in the percentage of participants interested in participating in health activities before services (50.0% vs. 52.2%) or after services (47.6% vs. 52.2%). However, the percentage of participants interested in participating in physical activity breaks or healthy food tasting during regularly scheduled faith community events increased markedly in the three month post-test.



## Preferred Methods for Receiving Health Information (see Figure 16 below and Table 18 in Appendix C)

The three month post-test indicates an increased interest in receiving health information that participants can read, listen to, or watch on their own (90.0% vs. 96.0%) as well as seeing the health information in bulletins, newsletters and on bulletin boards (85.7% vs. 88.0).



### **Challenges**

Participant Retention: Nearly half of the participants completed both pre- and post-test in Camden and Newark and about six out of ten completed both pre- and post-test in Trenton. Flexibility in scheduling and exploring strategies for recruitment and retention may help in increasing both program participation and completion rates.

- Staff Turnover: Impacted the full delivery of the first year requirements at one site and delayed data collection.
- Different Versions of the Form: Impacted pre/post comparison and across-the-board analysis.

### Conclusion

The Faith in Prevention Initiative has potential for broader reach, adoption, implementation, and greater impact. The program can be adapted to fit the needs of any faith community and its members. Participation in this grant helped the FBOs identify and adopt policies and practices that support the health and wellness of their members. The participating FBOs were at different stages of readiness to support member health and wellness. With regard to their participation, all 26 participating FBOs completed all elements of the program and made multiple positive changes to their food and physical activity policies and environments. They may consider completing this tool annually to identify most pressing needs of their community, discuss the priorities with the leadership and community members, and create an action plan to build healthier communities.

The impact of the program on participants was evident by better outcomes for most measures (including increased knowledge and understanding, change in behavior for healthier eating and physical activity, and an improvement in faith community environment to support healthier lifestyle) in all three cities. The pre/post differences were statistically significant for seven items in Camden and three items in Newark. The findings show that FFESMM sessions had a positive effect on participants and increased their consumption of fruits and vegetables, provided the skills and motivation to eat more meals at home, and increased regular physical activity. The three month post-test indicated that the behavioral changes sustained after three months of program completion. This suggests that implementing FFESMM may help FBOs improve health and the quality of life of their congregants.

### **Appendix A: Camden Coalition of Healthcare Providers**

### Faith Community Assessment (Pre/Post-test)

Table 1: Faith Community Assessment: Change in Pre/Post Test Scores					
Category	Scores Increased*	Scores Decreased *	Scores Unchanged*		
Health/Wellness Infrastructure	6	1	2		
Partnerships and Programs	6	1	1		
Physical Activity Environment	3	4	1		
Physical Activity Policies and Leadership	5	1	3		
Physical Activity Group/Support Classes	2	2	5		
Physical Activity Individual Education/Information	6	0	3		
Nutrition Environment	2	0	7		
Nutrition Policies and Leadership	6	2	1		
Nutrition Group/Support Classes	6	0	3		
Nutrition Individual Education/Information	5	1	2		

Faith-based Organization	Pre-test Score	Post-test Score	Action Items for FBOs to Consider
Baptist Temple Church	28.6%	14.3%	Include health in your mission statement
Suprise rempie emarem	20.070	11.570	Establish a health team or committee
			Develop a lay health advisor program
			<ul> <li>Conduct survey of members on health issue</li> </ul>
			Allocate funds for health promotion or
			health related activities and establish health
			or wellness goals for the
			organization/membership
Bethel Deliverance Church	71.4%	100.0%	None
Ferry Avenue United Methodist	28.6%	71.4%	Include health in your mission statement
Church			Develop a lay health advisor program
Hosanna AMEC	0.0%	57.1%	Establish a health team or committee and
			appoint a person to be responsible for
			health related activities
			Allocate funds for health promotion or
			health related activities
Masjidun-Nur Inc.	57.1%	57.1%	Data missing
New Life Church	85.7%	85.7%	Include health in your mission statement
New Life Ministries	42.9%	71.4%	Develop a lay health advisor program
			Allocate funds for health promotion or
			health related activities
Parkside United Methodist Church	85.7%	100.0%	None
Tenth Street Baptist Church	42.9%	100.0%	None

Table 3: Partnerships and Programs (# of items = 8)			
Faith-based Organization	Pre-test Score	Post-test Score	Action Items for FBOs to Consider
Baptist Temple Church	0%	0%	Develop partnership and programs for sponsoring health fairs, offering health screenings, health promotion, and develop association with a community health coalition or committee and another health or human services agency to provide services to members
Bethel Deliverance Church	75.0%	87.5%	<ul> <li>Appoint faith community nurse by participating in a parish nursing program to promote health and wellness of community members</li> </ul>
Ferry Avenue United Methodist Church	25.0%	50.0%	<ul> <li>Sponsor health fairs</li> <li>In addition to other health screenings, offer blood cholesterol and diabetes screenings</li> <li>Participate in a parish nursing program</li> </ul>
Hosanna AMEC	0.0%	37.5%	<ul> <li>Sponsor health fairs</li> <li>In addition to other health screenings, offer blood cholesterol and diabetes screenings</li> <li>Participate in a parish nursing program</li> <li>Represent faith community by serving on a community health coalition or council</li> </ul>
Masjidun-Nur Inc.	25.0%	75.0%	<ul> <li>In addition to other health screenings, offer diabetes screening</li> <li>Participate in a parish nursing program</li> </ul>
New Life Church	87.5%	75.0%	<ul> <li>In addition to other health screenings, offer blood cholesterol screening</li> </ul>
New Life Ministries	37.5%	50.0%	<ul> <li>Sponsor health fairs</li> <li>In addition to other health screenings, offer blood cholesterol, diabetes and healthy body weight screenings</li> </ul>
Parkside United Methodist Church	50.0%	Data missing	Sponsor health fairs
Tenth Street Baptist Church	62.5%	75.0%	<ul> <li>Participate in a parish nursing program</li> <li>Represent faith community by serving on a community health coalition or council</li> </ul>

Faith-based Organization	Pre-test Score	Post-test Score	Action Items for FBOs to Consider
Taitii-basca Organization	Tre-test score	031-1031 30010	Action fichis for 1 bos to consider
Baptist Temple Church	20.0%	0%	Develop environment for increasing and
			promoting physical activity by making space
			and equipment available
Bethel Deliverance Church	40.0%	100.0%	None
Ferry Avenue United Methodist	60.0%	20.0%	Develop environment for increasing and
Church			promoting physical activity by making space
			walking trails, playground available
Hosanna AMEC	40.0%	0.0%	<ul> <li>Identify ways (availability of space,</li> </ul>
			equipment, walking trail, playground) for
			members to be physically active
Masjidun-Nur Inc.	0.0%	0.0%	<ul> <li>Identify ways (availability of space,</li> </ul>
			equipment, walking trail, playground) for
			members to be physically active
New Life Church	80.0%	40.0%	<ul> <li>Identify additional ways (availability of</li> </ul>
			exercise equipment, walking trail etc.) for
			members to be physically active
New Life Ministries	0.0%	20.0%	Identify ways (availability of exercise
			equipment, walking trail, playground) for
			members to be physically active
Parkside United Methodist	40.0%	Data missing	Data missing
Church			
Tenth Street Baptist Church	20.0%	100.0%	None
Table 5: Physical Activity – Policies	and Leadership (#	of items = 3)	
Faith-based Organization	Pre-test Score	Post-test Score	Action Items for FBOs to Consider
Baptist Temple Church	33.3%	66.7%	Support physical activity opportunities at
			meetings or functions
Bethel Deliverance Church	66.7%	66.7%	Support physical activity opportunities at
			meetings or functions
Ferry Avenue United Methodist	66.6%	100.0%	None
Church			
Hosanna AMEC	0.0%	33.3%	<ul> <li>Develop a policy supporting physical activity</li> </ul>
			opportunities at meeting or functions and
			support physical activity opportunities at
			meetings or functions

Table 5: Physical Activity – Policie	es and Leadership (	(contd.)	
Masjidun-Nur Inc.	33.3%	0.0%	<ul> <li>Develop a policy supporting physical activity opportunities at meeting or functions and support physical activity opportunities at meetings or functions</li> </ul>
New Life Church	100.0%	100.0%	None
New Life Ministries	33.3%	100.0%	None
Parkside United Methodist Church	33.3%	33.3%	<ul> <li>Develop a policy supporting physical activity opportunities at meeting or functions and support physical activity opportunities at meetings or functions</li> </ul>
Tenth Street Baptist Church	66.7%	100.0%	None
Table 6: Physical Activity – Group	/Support Classes (	# of items = 3)	
Faith-based Organization	Pre-test Score	Post-test Score	Action Items for FBOs to Consider
Baptist Temple Church	0.0%	0.0%	<ul> <li>Develop programs for increasing and promoting physical activity (e.g. group classes, walking clubs, sports team)</li> </ul>
Bethel Deliverance Church	100.0%	66.7%	Sponsor or support sports team for members
Ferry Avenue United Methodist Church	33.3%	33.3%	<ul> <li>Develop programs for increasing and promoting physical activity (e.g. walking clubs, sports team)</li> </ul>
Hosanna AMEC	0.0%	33.3%	<ul> <li>Develop programs for increasing and promoting physical activity (e.g. walking clubs, sports team)</li> </ul>
Masjidun-Nur Inc.	33.3%	33.3%	None
New Life Church	66.7%	33.3%	<ul> <li>Develop programs for increasing and promoting physical activity (e.g. walking clubs, sports team)</li> </ul>
New Life Ministries	33.3%	100.0%	None
Parkside United Methodist Church	33.3%	33.3%	<ul> <li>Develop programs for increasing and promoting physical activity (e.g. walking clubs, sports team)</li> </ul>
Tenth Street Baptist Church	33.3%	33.3%	<ul> <li>Develop programs for increasing and promoting physical activity (e.g. walking clubs, sports team)</li> </ul>

Faith-based Organization	Pre-test Score	Post-test Score	Action Items for FBOs to Consider
Baptist Temple Church	28.6%	42.9%	<ul> <li>Provide fitness counseling to members</li> <li>Promote physical activity on the faith community website</li> <li>Cultivate relationship with a fitness club to get discounted rates for members</li> </ul>
Bethel Deliverance Church	85.7%	85.7%	Promote physical activity on the faith community website
Ferry Avenue United Methodist Church	42.9%	85.7%	Cultivate relationship with a fitness club to get discounted rates for members
Hosanna AMEC	0.0%	85.7%	Promote physical activity on the faith community website
Masjidun-Nur Inc.	28.6%	28.6%	None
New Life Church	57.1%	85.7%	Promote physical activity on the faith community website
New Life Ministries	28.6%	57.1%	<ul> <li>Provide fitness counseling to members</li> <li>Promote physical activity on the faith community website</li> <li>Cultivate relationship with a fitness club to get discounted rates for members</li> </ul>
Parkside United Methodist Church	42.6%	71.4%	<ul> <li>Promote physical activity on the faith community website</li> <li>Cultivate relationship with a fitness club to get discounted rates for members</li> </ul>
Tenth Street Baptist Church	71.4%	71.4%	<ul> <li>Promote physical activity on the faith community website, bulletin boards, newsletter</li> </ul>

Table 8: Nutrition-Environments	(# of items = 3)		
Faith-based Organization	Pre-test Score	Post-test Score	Action Items for FBOs to Consider
Baptist Temple Church	66.7%	66.7%	Develop community garden for members to share work and benefits
Bethel Deliverance Church	66.7%	100.0%	None
Ferry Avenue United Methodist Church	66.7%	66.7%	<ul> <li>Develop community garden for members to share work and benefits</li> </ul>
Hosanna AMEC	66.7%	66.7%	Develop community garden for members to share work and benefits
Masjidun-Nur Inc.	100.0%	100.0%	None
New Life Church	66.7%	66.7%	Develop community garden for members to share work and benefits
New Life Ministries	66.7%	66.7%	<ul> <li>Develop community garden for members to share work and benefits</li> </ul>
Parkside United Methodist Church	66.7%	66.7%	<ul> <li>Develop community garden for members to share work and benefits</li> </ul>
Tenth Street Baptist Church	66.7%	100.0%	None
Table 9: Nutrition – Policies and L	eadership (# of ite	ems = 8)	
Faith-based Organization	Pre-test Score	Post-test Score	Action Items for FBOs to Consider
Baptist Temple Church	37.5%	75.0%	<ul> <li>Develop guidelines to offer 100% fruit juice for faith community meals and serve healthier options at food events</li> </ul>
Bethel Deliverance Church	62.5%	87.5%	Develop guidelines to offer 100% fruit juice for faith community meals
Ferry Avenue United Methodist Church	100.0%	100.0%	None
Hosanna AMEC	12.5%	75.0%	<ul> <li>Develop guidelines to offer low-fat items and low/no sugar items for faith community meals</li> </ul>
Masjidun-Nur Inc.	12.5%	25.0%	Develop guidelines to offer healthier options for faith community meals

Table 9: Nutrition – Policies and Le	adership (contd.)		
New Life Church	87.5%	75.0%	Develop guidelines to offer low/no sugar items and low-sodium items for faith community meals
New Life Ministries	100.0%	62.5%	Develop guidelines to offer low-fat items, low/no sugar items and low-sodium items for faith community meals
Parkside United Methodist Church	87.5%	100.0%	None
Tenth Street Baptist Church	87.5%	100.0%	None

### Table 10: Nutrition - Group Support/Classes (# of items = 3)

Faith-based Organization	Pre-test Score	Post-test Score	Action Items for FBOs to Consider
Baptist Temple Church	33.3%	100.0%	None
Bethel Deliverance Church	66.7%	66.7%	Offer/organize weight loss support groups
Ferry Avenue United Methodist Church	66.7%	66.7%	Offer/organize weight loss support groups
Hosanna AMEC	0.0%	66.7%	Offer/organize weight loss support groups
Masjidun-Nur Inc.	0.0%	66.7%	None
New Life Church	100.0%	100.0%	None
New Life Ministries	0.0%	33.3%	Offer/organize weight loss support groups and any other nutrition classes or groups
Parkside United Methodist Church	66.7%	100.0%	None
Tenth Street Baptist Church	66.7%	100.0%	None

Table 11: Nutrition- Individual Education/Information (# of items = 6)			
Faith-based Organization	Pre-test Score	Post-test Score	Action Items for FBOs to Consider
Baptist Temple Church	50.0%		<ul> <li>Provide individual weight control or nutrition counseling</li> <li>Promote nutrition on faith community website</li> <li>Identify additional ways to support nutrition (e.g. healthy food guidelines for faith community day care program, for meals for seniors or needy families)</li> </ul>
Bethel Deliverance Church	100.0%	83.3%	<ul> <li>Provide individual weight control or nutrition counseling</li> </ul>
Ferry Avenue United Methodist Church	50.0%	83.3%	<ul> <li>Provide individual weight control or nutrition counseling</li> </ul>
Hosanna AMEC	0.0%	66.7%	<ul> <li>Promote nutrition on faith community website</li> <li>Identify additional ways to support nutrition (e.g. healthy food guidelines for faith community day care program, for meals for seniors or needy families)</li> </ul>
Masjidun-Nur Inc.	33.3%	33.3%	Data missing
New Life Church	16.7%	Data missing	Data missing
New Life Ministries	33.3%	66.7%	<ul> <li>Promote nutrition on faith community website</li> <li>Identify additional ways to support nutrition (e.g. healthy food guidelines for faith community day care program, for meals for seniors or needy families)</li> </ul>
Parkside United Methodist Church	50.0%	83.3%	Promote nutrition on faith community     website
Tenth Street Baptist Church	16.7%	66.7%	<ul> <li>Promote nutrition through posted information, bulletin, newsletter, and on the faith community website</li> </ul>

	Valid%*	n
Gender		
Female	87.4	111
Male	12.6	16
Race		
White or Caucasian	2.5	3
Black or African American	95.1	116
American Indian or Alaska Native	0.8	1
Chinese	0.0	0
Filipino	0.0	0
Japanese	0.0	0
Korean	0.0	0
Vietnamese	0.0	0
Other Asian	0.0	0
Native Hawaiian	0.0	0
Guamanian or Chamorro	0.0	0
Samoan	0.0	0
Other Pacific Islander	0.8	1
More than 1 race	0.8	1
Level of Education		
Grade 8 or below	3.9	5
Some high school	13.4	17
Grade 12 or GED	25.2	32
Some college or vocational school	29.1	37
Graduated 2 year college	14.2	18
Graduated 4 year college	9.4	12
Graduate school	4.7	6
*Does not include missing values	1	

Table 13: Participant Demographics (N= 56)	%	n		
Hispanic, Latino, or Spanish Origin				
Yes	4.6	6		
No	80.2	105		
Missing	15.3	20		
Total Household Income				
Less than 10,000	18.3	24		
\$10,000 - \$24,999	25.2	33		
\$25,000 - \$49,999	30.5	40		
\$50,000 \$74,999	6.1	8		
\$75,000 - \$99,999	6.1	8		
\$100,000 or over	2.3	3		
Missing	11.5	15		

	All Parti	All Participants		Participants with Matched Pre- and Post-test	
	Pre-test	Post-test	Pre-test	Post-test	
	(N=131)*	(N=132)*	(n=72)*	(n=72)*	
	% (n)	% (n)	`% (n)	`% (n)	
I understand what healthy food choices mea			, , ,	, ,	
Yes	93.8 (122)	96.9 (127)	91.7 (66)	94.4 (68)	
No	0.8 (1)	3.1 (4)	8.3 (6)	5.6 (4)	
Not sure	5.4 (7)	0.0	0.0	0.0	
I know how to include healthy choices					
Yes	92.2 (119)	94.6 (123)	93.0 (66)	93.0 (66)	
No	3.9 (5)	3.8 (5)	5.6 (4)	5.6 (4)	
Not sure	3.9 (5)	1.5 (2)	1.4 (1)	1.4 (1)	
Read food labels					
Yes	62.5 (80)	68.0 (87)	61.4 (43)	64.3 (45)	
No	35.2 (45)	26.6 (34)	37.1 (26)	31.4 (22)	
Not sure	2.3 (3)	5.5 (7)	1.4 (1)	4.3 (3)	
Leave food outside the refrigerator					
Yes	18.6 (24)	19.5 (25)	16.9 (12)	18.6 (13)	
No	79.1 (102)	77.3 (99)	80.3 (57)	80.0 (56)	
Not sure	2.3 (3)	3.1 (4)	2.8 (2)	1.4 (1)	
I understand the benefits of physical activity	1				
Yes	93.8 (121)	97.7 (125)	93.0 (66)	97.1 (67)	
No	3.1 (4)	2.3 (3)	2.8 (2)	2.9 (2)	
Not sure	3.1 (4)	0.0	4.2 (3)	0.0	
Interested in receiving health information					
Yes	85.3 (110)	88.5 (115)	87.3 (62)	88.6 (62)	
No	11.6 (15)	7.7 (10)	9.9 (7)	5.7 (4)	
Not sure	3.1 (4)	3.8 (5)	2.8 (2)	5.7 (4)	
*Does not include missing values		<u> </u>			

Table 15: Change in Behavior					
	All Partio	cipants	Participants with Matched Pre-		
			and Post-test		
	Pre-test	Post-test	Pre-test	Post-test	
	(N=131)*	(N=132)*	(n=72)*	(n=72)*	
	% (n)	% (n)	% (n)	% (n)	
Eat vegetables on most days	Eat vegetables on most days				
Yes	83.1 (108)	86.4 (114)	87.3 (62)	86.1 (61)	
No	16.2 (21)	11.4 (15)	12.7 (9)	12.5 (9)	
Not sure	0.8 (1)	0.8 (1)	0.0	0.0	
Eat Fruits on most days					
Yes	80.0 (100)	79.5 (105)	85.7 (60)	87.5 (63)	
No	18.4 (23)	17.4 (23)	12.9 (9)	12.5 (9)	
Not sure	1.6 (2)	2.3 (3)	1.4 (1)	0.0	

Table 15: Change in Behavior (contd.)			1	
	All Part	All Participants		th Matched Pre- ost-test
	Pre-test	Post-test	Pre-test	Post-test
	(N=131)*	(N=132)*	(n=72)*	(n=72)*
	% (n)	% (n)	% (n)	% (n)
Physical activity in the past month				
Yes	68.5 (87)	74.2 (98)	71.8 (51)	76.4 (55)
No	30.7 (39)	24.2 (32)	26.8 (19)	22.2 (16)
Not sure	0.8 (1)	0.0	1.4 (1)	1.4 (1)
Prepare and eat more meals at home				
Yes	81.4 (105)	89.3 (117)	85.9 (61)	90.1 (64)
No	18.6 (24)	9.9 (13)	14.1 (10)	9.9 (7)
Not sure	0.0	0.8 (1)	0.0	0.0
Plan weekly meals	<u>.</u>	_		
Yes	28.7 (37)	39.5 (51)	31.0 (22)	41.1 (29)
No	70.5 (91)	60.5 (78)	69.0 (49)	58.6 (41)
Not sure	0.8 (1)	0.0	0.0	0.0
Choose healthier food and control por	tions			
Yes	47.3 (61)	65.9 (83)	47.9 (34)	62.9 (44)
No	45.0 (58)	27.8 (35)	43.7 (31)	30.0 (21)
Not sure	7.8 (10)	6.3 (8)	8.5 (6)	5 (7.1)
Dislike healthy food choices				
Yes	33.8 (44)	31.7 (40)	33.3 (24)	31.9 (22)
No	52.3 (68)	57.1 (72)	54.2 (39)	56.5 (39)
Not sure	13.8 (18)	11.1 (14)	12.5 (9)	11.6 (8)
No. of sugar sweetened beverages/da				
0	21.9 (28)	25.8 (34)	18.3 (13)	22.2 (16)
1	28.1 (36)	32.6 (43)	25.4 (18)	36.1 (26)
2	30.5 (39)	23.5 (31)	32.4 (23)	18.1 (13)
3	7.0 (9)	7.6 (10)	7.0 (5)	11.1 (8)
4 or more	11.7 (15)	9.1 (12)	15.5 (11)	11.1 (8)
Occasionally	0.8 (1)	1.5 (2)	1.4 (1)	1.4 (1)
Try to be more physically active	0.0 (=)		(=/	(=/
Yes	78.7 (100)	92.1 (116)	77.1 (54)	89.9 (62)
No	17.3 (22)	4.8 (6)	18.6 (13)	5.8 (4)
Not sure	3.9 (5)	3.2 (4)	4.3 (3)	4.3 (3)
Use stairs or walk or bike to places	3.5 (5)	3.2 (7)	1.5 (5)	1.5 (5)
Yes	55.0 (71)	74.2 (95)	64.8 (46)	81.7 (58)
No	40.3 (52)	25.8 (33)	32.4 (23)	18.3 (13)
Not sure	4.7 (6)	0.0	2.8 (2)	0.0
Participate in team sports	1 7.7 (0)	1 0.0	2.0 (2)	0.0
Yes	8.5 (11)	15.0 (19)	8.5 (6)	13.0 (9)
No	91.5 (118)	84.3 (107)	91.5 (65)	87.0 (60)
Not sure	0.0	0.8 (1)	0.0	0.0
INOL SUITE	0.0	U.O (1)	J 0.0	0.0

Table 16: Change in My Faith Community				
	All Participants		Participants with Matched Pre- and Post-test	
	Pre-test (N=131)*	Post-test (N=132)*	Pre-test (n=72)*	Post-test (n=72)*
	% (n)	% (n)	% (n)	% (n)
My faith community serves heal	thy snacks			
Yes	42.5 (54)	57.6 (72)	38.6 (27)	58.6 (41)
No	28.3 (36)	24.0 (30)	31.4 (22)	20.0 (14)
Not sure	29.1 (37)	18.4 (23)	30.0 (21)	21.4 (15)
My faith community serves heal	thy meals			
Yes	44.4 (56)	63.6 (77)	43.5 (30)	58.0 (40)
No	25.4 (32)	20.7 (25)	29.0 (20)	21.7 (15)
Not sure	30.2 (38)	15.7 (19)	27.5 (19)	20.3 (14)
My faith community has places t	to be physically active	9		
Yes	23.0 (29)	37.5 (48)	24.6 (17)	37.7 (26)
No	63.5 (80)	51.6 (66)	56.5 (39)	47.8 (33)
Not sure	13.5 (17)	10.9 (14)	18.8 (13)	14.5 (10)
*Does not include missing values				

Table 17: Comparing Means, Matched Participants				
	Participants with Matched Pre- and Post-tes			
	Pre-test Mean	Post-test Mean	P value	
Change in knowledge				
I understand what healthy food choices mean	2.9	2.9	0.16	
I know how to include healthy choices	2.9	2.9	1.00	
Read food labels	2.2	2.3	0.22	
Understand food safety	1.4	1.4	0.83	
I understand the benefits of physical activity	2.9	3.0	0.09	
Interested in receiving health information	2.8	2.8	0.40	
Change in behavior				
Eat vegetables on most days	2.7	2.7	1.00	
Eat Fruits on most days	2.7	2.7	0.74	
No. of sugar sweetened beverages	1.8	1.5	0.02	
Physical activity in the past month	2.4	2.5	0.13	
No. of times physical activity	3.1	3.0	0.78	
Prepare and eat more meals at home	2.7	2.8	0.18	
Plan weekly meals	1.6	1.8	0.06	
Choose healthier food and control portions	2.1	2.3	0.00	
Dislike healthy food choices	1.7	1.8	0.87	
Try to be more physically active	2.6	2.8	0.00	
Use stairs or walk or bike to places	2.3	2.6	0.00	
Participate in team sports	1.2	1.3	0.18	
Change in my faith community				
My faith community serves healthy snacks	2.1	2.4	0.00	
My faith community serves healthy meals	2.1	2.4	0.01	
My faith community has places to be physically active	1.7	1.9	0.02	

### **Appendix B: Greater Newark Healthcare Coalition**

Table 1: Faith Community Assessment Summary Findings			
Categories	Minimum Score	Maximum Score	Action Items for FBOs to Consider (items not currently in place for the majority of FBOs)
Health/Wellness Infrastructure (# of items = 7)	2 (28.6%)	5 (71.4%)	<ul> <li>Include "health" in your mission statement and establish health or wellness goals for your organization</li> <li>Develop a lay health advisor program</li> <li>Survey faith community members annually on health issues and needs</li> <li>Allocate budget for health promotion or health related activities</li> </ul>
Partnerships and Programs (# of items = 8)	1 (12.5%)	6 (75.0%)	<ul> <li>Periodically sponsor health fairs, offer health screenings         (e.g. screening for blood cholesterol, blood sugar/diabetes)</li> <li>Appoint faith community nurse by participating in a parish nursing program to promote health and wellness of community members</li> <li>Represent faith community by serving on a community health coalition or committee</li> </ul>
Environment (# of items = 5)	0 (0%)	4 (80.0%)	<ul> <li>Identify ways to make space and equipment available for members to be more physically active (e.g. exercise room, exercise equipment, walking trials, playgrounds, outdoor courts)</li> </ul>
Policies and Leadership (# of items = 3) Group Support/Classes	1 (33.3%) 0 (0%)	2 (66.7%) 2 (66.7%)	<ul> <li>Develop policies to support physical activity at meeting or functions (e.g. walks, exercise breaks)</li> <li>Offer/organize group classes, walking clubs for members</li> <li>Sponsor or support sports team for members</li> </ul>

Table 1: Faith Com	Table 1: Faith Community Assessment Summary Findings (contd.)			
Categories	Minimum	Maximum	Action Items for FBOs to Consider	
	Score	Score	(items not currently in place for the majority of FBOs)	
Individual	0	3	<ul> <li>Develop policies and programs for increasing and</li> </ul>	
Education/Infor	(0%)	(42.9%)	promoting physical activity (e.g. supporting opportunities	
mation			at meetings or functions, group classes, walking clubs,	
(# of items = 7)			fitness counseling, posting on the bulletin boards,	
			newsletter, website)	
			Find additional ways to support physical activity (e.g.	
			include physical activity time during religious education classes)	
			Cultivate relationship with a fitness club to get discounted	
			rates for members	
Nutrition				
Environment	0	3	Develop community garden for members to share work	
(# of items = 3)	(0%)	(100.0%)	and benefits	
Policies and	0	8	<ul> <li>Develop guidelines for offering healthier options for faith</li> </ul>	
Leadership	(0%)	(100.0%)	community meals	
(# of items = 8)				
Group	0	3	<ul> <li>Offer weight loss support groups to motivate members</li> </ul>	
Support/Classes	(0%)	(100.0%)	and find additional nutrition related classes for members	
(# of items = 3)				
Individual	0	4	Offer weight control or nutrition counseling to members	
Education/Infor	(0%)	(66.7%)	Promote nutrition on the faith community website to raise	
mation			awareness	
(# of items = 6)			• Find additional ways to support nutrition (e.g. healthy food	
			guidelines for faith community programs)	

Table 2: Faith Co	mmunity Assessment Pre-test by	Participating FBOs
Faith-based Organization	% Scored	Action Items for FBOs to Consider
Allen AME Church	<ul> <li>Health and wellness: 28.6%</li> <li>Partnerships and Programs: 75.0%</li> <li>Physical Activity         <ul> <li>Environment: 0.0%</li> <li>Policies and Leadership: 66.7%</li> <li>Group/Support Classes: 0.0%</li> <li>Individual Education/Information: 0.0%</li> </ul> </li> <li>Nutrition:         <ul> <li>Environment: 0.0%</li> <li>Policies and Leadership: 100.0%</li> <li>Group/Support Classes: 33.3%</li> <li>Individual Education/Information: 33.3%</li> </ul> </li> </ul>	<ul> <li>Include health in your mission statement</li> <li>Establish a health team or committee</li> <li>Develop a lay health advisor program</li> <li>Conduct survey of members on health issues</li> <li>Allocate funds for health promotion or health related activities</li> <li>Represent faith community by serving on a community health coalition or committee and develop relationship with other health or human services agency to provide services to members</li> <li>Develop environment that supports and promotes physical activity by making space and equipment available (such as exercise room, walking trails, playground etc.)</li> <li>Develop policies and programs for increasing and promoting physical activity (e.g. supporting opportunities at meetings or functions, group classes, walking clubs, fitness counseling, posting on the bulletin boards, newsletter, website)</li> <li>Cultivate relationship with a fitness club to get discounted rates for members</li> <li>Build kitchen and community garden and have a cooking or hospitality committee in place</li> <li>Organize nutrition-related classes to teach healthy cooking, weight loss support groups, and promote nutrition on the faith</li> </ul>
Greater Abyssinian Baptist Church	<ul> <li>Health and wellness: 28.6%</li> <li>Partnerships and Programs: 12.5%</li> <li>Physical Activity:         <ul> <li>Environment: 60.0%</li> <li>Policies and Leadership: 66.7%</li> <li>Group/Support Classes: 66.7%</li> <li>Individual Education/Information: 42.9%</li> </ul> </li> <li>Nutrition:         <ul> <li>Environment: 66.7%</li> </ul> </li> </ul>	<ul> <li>Establish framework to support health and wellness of community members (e.g. include health in your mission statement, develop a lay health advisor program, conduct survey of members on health issues, establish health or wellness goals for your organization, allocate budget for health related activities)</li> <li>Develop partnership and programs for sponsoring health fairs, offering screenings, and represent faith community by serving on a community health coalition or committee</li> <li>Promote physical activity on the faith community website, provide individual fitness counseling, distribute fitness guides, and identify ways for members to be more physically active (e.g. outdoor courts, playground)</li> <li>Cultivate relationship with a fitness club to get discounted rates for members</li> </ul>

Table 2: Faith Cor	mmunity Assessment Pre-test by	Participating FBOs
Jehovah-Jireh Praise and Worship Church Center	<ul> <li>Policies and Leadership: 12.5%</li> <li>Group/Support Classes: 0.0%</li> <li>Individual Education/Information: 0.0%</li> <li>Health and wellness: 71.4%</li> <li>Partnerships and Programs: 12.5%</li> <li>Physical Activity:         <ul> <li>Environment: 80.0%</li> <li>Policies and Leadership: 66.7%</li> <li>Group/Support Classes: 66.7%</li> <li>Individual Education/Information: 28.6%</li> </ul> </li> <li>Nutrition:         <ul> <li>Environment: 66.7%</li> <li>Policies and Leadership: 25.0%</li> <li>Group/Support Classes: 66.7%</li> <li>Individual Education/Information: 50.0%</li> </ul> </li> </ul>	<ul> <li>Develop community garden for members to share work and benefits</li> <li>Develop guidelines to offer healthier options for faith community meals</li> <li>Offer/organize group classes to teach healthy cooking and nutrition, weight control counseling, and distribute nutrition guides or healthy recipes</li> <li>Organize weight loss support groups, distribute nutrition guides or healthy recipes and promote nutrition on the faith community website</li> <li>Develop a lay health advisor program, and allocate budget for health related activities</li> <li>Develop partnership and programs for sponsoring health fairs, offering screenings, and health promotion activities</li> <li>Promote physical activity through posted information, faith community website</li> <li>Identify additional ways for members to be more physically active (e.g. organize group classes, fitness counseling, equipment available for exercise, distribute fitness guides)</li> <li>Develop policies for supporting physical activity opportunities at meetings or functions</li> <li>Cultivate relationship with a fitness club to get discounted rates for members</li> <li>Develop community garden for members to share work and benefits</li> <li>Develop guidelines to offer healthier options for faith community meals</li> <li>Offer/organize group classes to teach healthy cooking and nutrition, weight control counseling, and weight loss support groups</li> </ul>
	30.070	<ul> <li>Promote nutrition through posted information, bulletins, programs, newsletter, and on the faith community website</li> </ul>
Clearview Baptist Church	<ul> <li>Health and wellness: 42.9%</li> <li>Partnerships and Programs: 50.0%</li> <li>Physical Activity:         <ul> <li>Environment: 20.0%</li> <li>Policies and Leadership: 33.3%</li> <li>Group/Support Classes: 33.3%</li> </ul> </li> </ul>	<ul> <li>Establish framework to support health and wellness of community members (e.g. include health in your mission statement, develop a lay health advisor program, conduct survey of members on health issues, establish health or wellness goals for your organization)</li> <li>Develop partnership and programs for sponsoring health fairs, and offering screenings</li> <li>Promote physical activity through posted information, bulletin, newsletter, faith community website</li> </ul>

Table 2: Faith Cor	mmunity Assessment Pre-test by	Participating FBOs
	<ul> <li>Individual         Education/Information:         14.3%</li> <li>Nutrition:         Environment: 33.3%         Policies and Leadership:         37.5%</li> <li>Group/Support Classes:         100.0%</li> <li>Individual         Education/Information:         33.3%</li> </ul>	<ul> <li>identify additional ways for members to be more physically active (e.g. organize walking clubs, make space, equipment available for exercise, distribute fitness guides, offer fitness counseling)</li> <li>Develop policies for supporting physical activity opportunities at meetings or functions</li> <li>Develop community garden for members to share work and benefits</li> <li>Develop guidelines to offer healthier options for faith community meals</li> <li>Offer weight control counseling, and distribute nutrition guides or healthy recipes</li> <li>Promote nutrition on the faith community website</li> </ul>
Israel Memorial	<ul> <li>Health and wellness: 71.4%</li> <li>Partnerships and Programs: 50.0%</li> <li>Physical Activity:         <ul> <li>Environment: 40.0%</li> <li>Policies and Leadership: 33.3%</li> <li>Group/Support Classes: 0.0%</li> <li>Individual Education/Information: 42.9%</li> </ul> </li> <li>Nutrition:         <ul> <li>Environment: 40.0%</li> <li>Policies and Leadership: 100.0%</li> <li>Group/Support Classes: 100.0%</li> <li>Individual Education/Information: 66.7%</li> </ul> </li> </ul>	<ul> <li>Conduct survey of members on health issues</li> <li>Allocate budget for health related activities</li> <li>Develop partnership and programs for sponsoring health fairs, offering screenings, and developing association with community health coalition or committee</li> <li>Identify ways (availability of space, equipment, walking trail, playground, group classes etc.) for members to be physically active</li> <li>Develop policies for supporting physical activity opportunities at meetings or functions</li> <li>Develop policies and programs for increasing and promoting physical activity (e.g. group classes, walking clubs, fitness counseling, posting on the website)</li> <li>Cultivate relationship with a fitness club to get discounted rates for members</li> <li>Develop community garden for members to share work and benefits</li> <li>Offer bottled water and 100% juice in vending machines</li> <li>Promote nutrition on faith community website</li> </ul>
St. John's Community Baptist	<ul> <li>Health and wellness: 28.6%</li> <li>Partnerships and Programs: 25.0%</li> <li>Physical Activity: <ul> <li>Environment: 0.0%</li> <li>Policies and Leadership: 33.3%</li> </ul> </li> </ul>	<ul> <li>Establish framework to support health and wellness of community members (e.g. include health in your mission statement, develop a lay health advisor program, conduct survey of members on health issues, establish health or wellness goals for your organization, allocate budget for health related activities)</li> </ul>

Table 2: Faith Cor	mmunity Assessment Pre-test by F	Participating FBOs
	<ul> <li>Group/Support Classes:         <ul> <li>0.0%</li> <li>Individual</li></ul></li></ul>	<ul> <li>Develop partnership and programs for sponsoring health fairs, offering screenings, and represent faith community by serving on a community health coalition or committee</li> <li>Identify ways (availability of space, equipment, walking trail, playground, group classes, walking clubs, distribute fitness guides, offer fitness counseling etc.) for members to be physically active</li> <li>Promote physical activity through newsletter, bulletin board, and on the faith community website</li> <li>Cultivate relationship with a fitness club to get discounted rates for members</li> <li>Develop guidelines to offer healthier options for faith community meals</li> <li>Offer/organize group classes to teach healthy cooking and nutrition, weight control counseling, and promote on faith community website</li> </ul>
Franklin St. John's UMC	<ul> <li>Health and wellness: 42.9%</li> <li>Partnerships and Programs: 75.0%</li> <li>Physical Activity:         <ul> <li>Environment: 0.0%</li> <li>Policies and Leadership: 33.3%</li> <li>Group/Support Classes: 0.0%</li> <li>Individual Education/Information: 0.0%</li> </ul> </li> <li>Nutrition:         <ul> <li>Environment: 66.7%</li> <li>Policies and Leadership: 0.0%</li> <li>Group/Support Classes: 33.3%</li> <li>Individual Education/Information: 66.7%</li> </ul> </li> </ul>	<ul> <li>Establish framework to support health and wellness of community members (e.g. include health in your mission statement, conduct survey of members on health issues, establish health or wellness goals for your organization, allocate budget for health related activities)</li> <li>Sponsor health fairs, and represent faith community by serving on a community health coalition or committee</li> <li>Identify ways (availability of space, equipment, walking trail, playground, group classes, walking clubs, distribute fitness guides, offer fitness counseling etc.) for members to be physically active</li> <li>Promote physical activity through newsletter, bulletin board, and on the faith community website</li> <li>Establish a cooking, kitchen or hospitality committee</li> <li>Develop guidelines to offer healthier options for faith community meals</li> <li>Offer/organize group classes to teach healthy cooking and nutrition, weight control counseling, and promote on faith community website</li> <li>Distribute nutrition guides/healthy recipes to members and promote nutrition and healthy eating on faith community website)</li> </ul>

Table 3: Participant Demographics (N= 56)	Valid%*	n
Gender		
Female	94.5	52
Male	5.5	3
Race		
White or Caucasian	1.8	1
Black or African American	92.7	51
American Indian or Alaska Native	0.0	0
Asian Indian	0.0	0
Chinese	0.0	0
Filipino	0.0	0
Japanese	0.0	0
Korean	0.0	0
Vietnamese	0.0	0
Other Asian	0.0	0
Native Hawaiian	0.0	0
Guamanian or Chamorro	0.0	0
Samoan	0.0	0
Other Pacific Islander	1.8	1
More than 1 race	3.6	2
Level of Education		
Grade 8 or below	1.8	1
Some high school	3.6	2
Grade 12 or GED	16.4	9
Some college or vocational school	29.1	16
Graduated 2 year college	14.5	8
Graduated 4 year college	18.2	10
Graduate school	16.4	9
*Does not include missing values		
Table 4: Participant Demographics (N= 56)	%	n
Hispanic, Latino, or Spanish Origin		
Yes	1.8	1
No	69.6	39
Missing	28.6	16
Total Household Income		
Less than 10,000	5.4	3
\$10,000 - \$24,999	8.9	5
\$25,000 - \$49,999	21.4	12
\$50,000 \$74,999	23.2	13
\$75,000 - \$99,999	7.1	4
\$100,000 or over	8.9	5
Other (retired )	1.8	1
Missing	23.2	13

Table 5: Change in Knowledge						
	All Participants		Participants with Matched Pre- and Post-test			
	Pre-test (N=56)*	Post-test (N=36)*	Pre-test	Post-test		
	% (n)	% (n)	(N=25)*	(N=25)*		
	, o ()	75 ()	% (n)	% (n)		
I understand what healthy food choice	ces mean					
Yes	92.9 (52)	100.0 (35)	96.0 (24)	100.0 (24)		
No	1.8 (1)	0.0	4.0 (1)	0.0		
Not sure	5.4 (3)	0.0	0.0	0.0		
I know how to include healthy choice	S					
Yes	94.5 (52)	100.0 (35)	96.0 (24)	100.0 (24)		
No	1.8 (1)	0.0	4.0 (1)	0.0		
Not sure	3.6 (2)	0.0	0.0	0.0		
Read food labels						
Yes	67.9 (38)	71.4 (25)	68.0 (17)	83.3 (20)		
No	30.4 (17)	28.6 (10)	32.0 (8)	16.7 (4)		
Not sure	1.8 (1)	0.0	0.0	0.0		
Understand food safety						
Yes	18.2 (10)	22.9 (8)	20.0 (5)	25.0 (6)		
No	78.2 (43)	77.1 (27)	76.0 (19)	75.0 (18)		
Not sure	3.6 (2)	0.0	0.0	0.0		
I understand the benefits of physical	I understand the benefits of physical activity					
Yes	94.4 (51)	100.0 (35)	96.0 (24)	100.0 (24)		
No	1.9 (1)	0.0	4.0 (1)	0.0		
Not sure	3.7 (2)	0.0	0.0	0.0		
Interested in receiving health information						
Yes	83.3 (45)	80.0 (28)	84.0 (21)	91.7 (22)		
No	11.1 (6)	20.0 (7)	8.0 (2)	8.3 (2)		
Not sure	5.6 (3)	0.0	8.0 (2)	0.0		
*Does not include missing values						

Table 6: Change in Behavior						
	All Participants		Participants with Matched Pre- and Post-test			
	Pre-test (N=56)*	Post-test	Pre-test	Post-test		
	% (n)	(N=36)*	(N=25)*	(N=25)*		
		% (n)	% (n)	% (n)		
Eat vegetables on most days	Eat vegetables on most days					
Yes	87.5 (49)	94.4 (34)	92.0 (23)	100.0 (25)		
No	12.5 (7)	5.6 (2)	8.0 (2)	0.0		
Not sure	0.0	0.0	0.0	0.0		
Eat Fruits on most days						
Yes	77.4 (41)	85.3 (29)	68.0 (17)	87.5 (21)		
No	20.8 (11)	14.7 (5)	28.0 (7)	12.5 (3)		
Not sure	1.9 (1)	0.0	0.0	0.0		

Table 6: Item Frequencies, Change in Behavior (contd.)					
	All Participants		Participants with Matched Pre- and Post-test		
Physical activity in the past month					
Yes	89.1 (49)	80.0 (28)	92.0 (23)	91.7 (22)	
No	10.9 (6)	20.0 (7)	8.0 (2)	8.3 (2)	
Not sure	0.0	0.0	0.0	0.0	
Prepare and eat more meals at home		<u>.</u>			
Yes	72.7 (40)	85.3 (29)	72.0 (18)	87.0 (20)	
No	25.5 (14)	14.7 (5)	28.0 (7)	13.0 (3)	
Not sure	1.8 (1)	0.0	0.0	0.0	
Plan weekly meals		·			
Yes	24.1 (13)	39.4 (13)	16.0 (4)	50.0 (11)	
No	74.1 (40)	57.5 (19)	84.0 (21)	45.5 (10)	
Not sure	1.9 (1)	3.0 (1)	0.0	4.5 (1)	
Choose healthier food and control portion	S	<u>.</u>			
Yes	60.7 (34)	82.4 (28)	68.0 (17)	91.7 (22)	
No	30.4 (17)	14.7 (5)	24.0 (6)	8.3 (2)	
Not sure	8.9 (5)	1 (2.9)	8.0 (2)	0.0	
Dislike healthy food choices		·			
Yes	26.4 (14)	36.4 (12)	26.1 (6)	27.3 (6)	
No	66.0 (35)	60.6 (20)	60.9 (14)	63.6 (14)	
Not sure	7.5 (4)	3.0 (1)	13.0 (3)	9.1 (2)	
No. of sugar sweetened beverages/day					
0	29.1 (16)	25.0 (9)	29.2 (7)	28.0 (7)	
1	18.2 (10)	30.6 (11)	16.7 (4)	24.0 (6)	
2	32.7 (18)	33.3 (12)	29.2 (7)	40.0 (10)	
3	10.9 (6)	5.6 (2)	12.5 (3)	8.0 (2)	
4 or more	9.1 (5)	5.6 (2)	12.5 (3)	0.0	
Try to be more physically active					
Yes	84.9 (45)	97.1 (34)	95.8 (23)	100.0 (24)	
No	13.2 (7)	2.9 (1)	4.2 (1)	0.0	
Not sure	1.9 (1)	0.0	0.0	0.0	
Use stairs or walk or bike to places					
Yes	55.6 (30)	54.3 (19)	54.2 (13)	54.2 (13)	
No	44.4 (24)	40.0 (14)	45.8 (11)	33.3 (8)	
Not sure	0.0	5.7 (2)	0.0	12.5 (3)	
Participate in team sports					
Yes	14.8 (8)	14.3 (5)	12.0 (3)	8.3 (2)	
No	85.2 (46)	82.9 (29)	88.0 (22)	87.5 (21)	
Not sure	0.0	2.9 (1)	0.0	4.2 (1)	
*Does not include missing values					

Table 7: Change in My Faith Community					
	All Participants		Participants with Matched Pre- and		
			Post-test		
	Pre-test (N=56)*	Post-test (N=36)*	Pre-test (N=25)*	Post-test (N=25)*	
	% (n)	% (n)	% (n)	% (n)	
My faith community serves health	y snacks				
Yes	25.0 (14)	51.4 (18)	32.0 (8)	45.8 (11)	
No	46.4 (26)	28.6 (10)	40.0 (10)	41.7 (10)	
Not sure	28.6 (16)	20.0 (7)	28.0 (7)	12.5 (3)	
My faith community serves health	y meals				
Yes	33.3 (18)	57.1 (20)	40.0 (10)	54.2 (13)	
No	40.7 (22)	22.9 (8)	32.0 (8)	33.3 (8)	
Not sure	25.9 (14)	20.0 (7)	28.0 (7)	12.5 (3)	
My faith community has places to be physically active					
Yes	46.3 (25)	72.7 (24)	48.0 (12)	63.6 (14)	
No	46.3 (25)	27.3 (9)	44.0 (11)	36.4 (8)	
Not sure	7.4 (4)	0.0	8.0 (2)	0.0	
*Does not include missing values					

Table 8: Comparing Means, Matched Participants				
	Participants with Matched Pre- and Post-test (N=25)			
	Pre-test Mean	Post-test Mean	P value	
Change in Knowledge				
I understand what healthy food choices mean	3.0	3.0	0.33	
I know how to include healthy choices	3.0	3.0	0.32	
Read food labels	2.4	2.7	0.18	
Understand food safety	1.5	1.5	0.86	
I understand the benefits of physical activity	2.9	3.0	0.33	
Interested in receiving health information	2.8	2.8	0.16	
Change in behavior				
Eat vegetables on most days	2.8	3.0	0.16	
Eat Fruits on most days	2.4	2.6	0.03	
No. of sugar sweetened beverages	1.6	1.3	0.12	
Physical activity in the past month	2.9	2.8	0.57	
No. of times physical activity	2.8	2.7	0.69	
Prepare and eat more meals at home	2.4	2.7	0.16	
Plan weekly meals	1.4	2.0	0.00	
Choose healthier food and control portions	2.4	2.8	0.02	
Dislike healthy food choices	1.8	1.7	0.84	
Try to be more physically active	2.9	3.0	0.33	
Use stairs or walk or bike to places	2.1	2.2	0.87	
Participate in team sports	1.3	1.2	0.79	
Change in my faith community				
My faith community serves healthy snacks	2.0	2.0	0.65	
My faith community serves healthy meals	2.1	2.2	0.52	
My faith community has places to be physically active	2.1	2.3	0.36	

### **Appendix C: Trenton Health Team**

Table 1: Faith Community Assessment: Change in Pre/Post Test Scores					
Category	Scores Increased*	Scores Decreased *	Scores Unchanged*		
Health/Wellness Infrastructure (# of items = 5)	3	2	3		
Physical Activity Policies and Environment (# of items = 7)	8	0	0		
Physical Activity Programs and Education (# of items = 5)	6	2	0		
Healthy Eating Policies and Environments ((# of items = 6)	4	0	4		
Healthy Eating Programs and Education (# of items = 6)	7	0	1		
*Post-test data not available for 2 FBOs					

Faith-based Organization	Pre-test	Post-test	Action Items for FBOs to Consider
Taltii-based Organization	Score	Score	Action items for i bos to consider
Bethany Evangelical Lutheran Church	40.0%	80.0%	Sponsor health fairs for members
Bethel World Outreach	80.0%	60.0%	<ul> <li>Sponsor health fairs for members</li> <li>Represent your organization by serving on community health coalition or committee</li> </ul>
Cadwalader Asbury United Methodist Church	40.0%	40.0%	<ul> <li>Establish a health team or committee and appoint a person for all health related activities</li> <li>Sponsor health fairs for members</li> </ul>
Christ Episcopal Church	100.0%	60.0%	<ul> <li>Sponsor health fairs for members</li> <li>Develop association with community health coalition or committee and another health or human services agency to represent your organization as well as provide services to members</li> </ul>
Church of the Blessed Sacrament	80.0%	100.0%	None
El Centro of Catholic Charities	40.0%	80.0%	Represent your organization by serving on community health coalition or committee
Saint Vladimir Orthodox Church	20.0%	20.0%	<ul> <li>Establish a health team or committee and appoint a person for all health related activities</li> <li>Sponsor health fairs for members</li> <li>Represent your organization by serving on community health coalition or committee</li> </ul>
Shiloh Baptist Church	60.0%		<ul> <li>Sponsor health fairs for members</li> <li>Represent your organization by serving on community health coalition or committee</li> </ul>
Trinity Episcopal Church	100.0%	100.0%	None
Westminster Presbyterian Church	60.0%		<ul> <li>Sponsor health fairs for members</li> <li>Represent your organization by serving on community health coalition or committee</li> </ul>

Table 3: Physical Activity Policies and Environment (# of items = 7)			
Faith-based Organization	Pre-test Score	Post-test Score	Action Items for FBOs to Consider
Bethany Evangelical Lutheran Church	28.6%		<ul> <li>Identify ways (availability of space, equipment, walking trail, playground) for members to be physically active</li> <li>Develop policies for supporting physical activity opportunities at meetings or functions</li> </ul>
Bethel World Outreach	71.4%	100.0%	None
Cadwalader Asbury United Methodist Church	0.0%		<ul> <li>Identify ways (availability of space, equipment, walking trail, playground etc.) for members to be physically active</li> <li>Develop policies for supporting physical activity opportunities at meetings or functions</li> </ul>
Christ Episcopal Church	42.9%		<ul> <li>Develop environment for increasing and promoting physical activity (e.g. walking trails, courts etc.)</li> <li>Develop policies for supporting physical activity opportunities at meetings or functions</li> </ul>
Church of the Blessed Sacrament	28.6%	71.4%	<ul> <li>Develop environment for increasing and promoting physical activity (e.g. walking trails, courts etc.)</li> </ul>
El Centro of Catholic Charities	28.6%	42.9%	<ul> <li>Identify ways (availability of space, equipment, walking trail, courts etc.) for members to be physically active</li> </ul>
Saint Vladimir Orthodox Church	0%	57.1%	<ul> <li>Identify ways (availability of space, equipment, walking trail, playground) for members to be physically active</li> </ul>
Shiloh Baptist Church	14.3%		<ul> <li>Identify ways (availability of space, equipment, walking trail, playground) for members to be physically active</li> <li>Develop policies for supporting physical activity opportunities at meetings or functions</li> <li>Request leadership to promote physical activity in a public speech or sermon</li> </ul>
Trinity Episcopal Church	57.1%	85.7%	None
Westminster Presbyterian Church	85.7%	Data missing	<ul> <li>Develop environment for increasing and promoting physical activity by making exercise equipment available</li> </ul>

Table 4: Physical Activity Programs and Education (# of items = 5)

Faith-based Organization	Pre-test Score	Post-test Score	Action Items for FBOs to Consider
Bethany Evangelical Lutheran Church	0%		<ul> <li>Develop programs for increasing and promoting physical activity (e.g. walking clubs, sports team)</li> <li>Promote physical activity in through posted information, bulletins, newsletter</li> </ul>
Bethel World Outreach	100.0%	80.0%	<ul> <li>Develop walking clubs for increasing and promoting physical activity</li> </ul>
Cadwalader Asbury United Methodist Church	0%		<ul> <li>Develop programs for increasing and promoting physical activity (e.g. group classes, walking clubs, sports team)</li> <li>Promote physical activity in bulletins, newsletter</li> </ul>
Christ Episcopal Church	40.0%	100.0%	None
Church of the Blessed Sacrament	100.0%	80.0%	Organize or support a sports team for members
El Centro of Catholic Charities	40.0%	80.0%	Organize or support a sports team for members
Saint Vladimir Orthodox Church	0.0%	60.0%	<ul> <li>Develop programs for increasing and promoting physical activity (e.g. walking clubs, sports team)</li> </ul>
Shiloh Baptist Church	20.0%		<ul> <li>Develop programs for increasing and promoting physical activity (e.g. group classes, sports team)</li> <li>Promote physical activity in through posted information, bulletins, newsletter</li> </ul>
Trinity Episcopal Church	0%	20.0%	Organize or support a sports team for members
Westminster Presbyterian Church	80.0%	Data missing	Promote physical activity in bulletins, newsletter

Table 5: Healthy Eating Policies and Environments (# of items = 6)			
Faith-based Organization	Pre-test Score	Post-test Score	Action Items for FBOs to Consider
Bethany Evangelical Lutheran Church	33.3%	83.3%	<ul> <li>Plan to buy an equipment (e.g. steamers, blenders etc.) that supports healthier meal preparation</li> </ul>
Bethel World Outreach	83.3%	83.3%	<ul> <li>Develop community garden for members to share work and benefits</li> </ul>
Cadwalader Asbury United Methodist Church	50.0%	50.0%	<ul> <li>Develop community garden for members to share work and benefits</li> <li>Create a private and comfortable space for women to breastfeed</li> <li>Plan to buy an equipment (e.g. steamers, blenders etc.) that supports healthier meal preparation</li> </ul>
Christ Episcopal Church	33.3%	100.0%	None
Church of the Blessed Sacrament	50.0%	83.3%	<ul> <li>Develop community garden for members to share work and benefits</li> </ul>
El Centro of Catholic Charities	50.0%	50.0%	<ul> <li>Develop community garden for members to share work and benefits</li> <li>Develop guidelines to offer healthier options for faith community meals</li> <li>Plan to buy an equipment (e.g. steamers, blenders etc.) that supports healthier meal preparation</li> </ul>
Saint Vladimir Orthodox Church	16.7%	83.3%	<ul> <li>Develop guidelines to offer healthier options for faith community meals</li> </ul>
Shiloh Baptist Church	33.3%	Data missing	<ul> <li>Develop community garden for members to share work and benefits</li> <li>Develop guidelines to offer healthier options for faith community meals</li> <li>Request leadership to promote healthy eating in a public speech</li> <li>Create a private and comfortable space for women to breastfeed</li> </ul>
Trinity Episcopal Church	100.0%	100.0%	None
Westminster Presbyterian Church	83.3%	Data missing	<ul> <li>Plan to buy an equipment (e.g. steamers, blenders etc.) that supports healthier meal preparation</li> </ul>

Table 6: Healthy Eating Programs and Education (# of items = 6)			
Faith-based Organization	Pre-test Score	Post-test Score	Action items for FBOs to Consider
Bethany Evangelical Lutheran Church	0%	100.0%	None
Bethel World Outreach	0%	66.7%	<ul> <li>Offer/organize weight loss support groups and nutrition related classes</li> </ul>
Cadwalader Asbury United Methodist Church	66.7%	66.7%	<ul> <li>Offer/organize weight loss support groups and nutrition related classes</li> </ul>
Christ Episcopal Church	50.0%	83.3%	Offer/organize weight loss support groups
Church of the Blessed Sacrament	83.3%	100.0%	None
El Centro of Catholic Charities	0%	83.3%	Offer/organize weight loss support groups
Saint Vladimir Orthodox Church	66.7%	83.3%	Offer/organize weight loss support groups
Shiloh Baptist Church	16,7%	Data missing	<ul> <li>Offer/organize weight loss support groups and nutrition related classes</li> </ul>
			<ul> <li>Distribute healthy eating guides or health recipes</li> </ul>
			<ul> <li>Promote healthy eating through posted information, bulletins, programs or news letter</li> </ul>
Trinity Episcopal Church	83.3%	100.0%	None
Westminster Presbyterian Church	83.3%	Data missing	Offer/organize weight loss support groups

## Eat Smart, Move More Member Health and Interest Survey (N=163)

Table 7: Item Frequencies, Healthy Eating and Physical Activity Habits			
		Valid %*	n
Nutrition			
	Yes	46.4	58
Eat 2-3 cups of vegetables on most	No	38.4	48
days	Not sure	15.2	19
	Missing**		38
	Yes	58.5	72
Eat 1.5-2 cups of fruits on most	No	33.3	41
days	Not sure	8.1	10
	Missing**		40
	Yes	24.2	30
Drink regular (not diet) soda every	No	72.6	90
day	Not sure	3.2	4
	Missing**		39
Physical Activity			
	Less than 30 mins	44.4	55
I do moderate or vigorous physical	30-60 mins	38.7	48
activity on most days for	More than 1 hour	16.9	21
	Missing**		39
*Does not include missing values			

<sup>\*\*36</sup> participants completed the Spanish version of the pre-test where this question was different or missing

Table 8: Item Frequencies, Interest in Learning About Healthy Food and Physical Activity			
I am interested in -		Valid%*	n
	Yes	95.6	151
learning about healthy food choices	No	3.2	5
	Not sure	1.3	2
In a main a substant in a sum a matter of multiple and	Yes	92.9	144
learning about incorporating fruits and vegetables into my diet	No	6.5	10
vegetables into my diet	Not sure	0.6	1
learning about healthier food choices	Yes	94.4	119
and portion size to help manage my	No	4.0	5
weight	Not sure	1.6	2
	Yes	93.1	149
participating in "tasting" events to sample healthy foods	No	2.5	4
sample fleatiny foods	Not sure	4.4	7
	Yes	91.9	147
learning about benefits of physical activity	No	5.0	8
activity	Not sure	3.1	5
	Yes	93.1	149
increasing my physical activity level	No	3.1	5
	Not sure	3.8	6
	Yes	90.9	140
walking to increase my physical activity level	No	5.8	9
	Yes       94.4         No       4.0         Not sure       1.6         Yes       93.1         No       2.5         Not sure       4.4         Yes       91.9         No       5.0         Not sure       3.1         Yes       93.1         Not sure       3.8         Yes       90.9	5	
	Yes	75.0	117
participating in team activities	No	9.0	14
	Not sure	16.0	25
*Does not include missing values			

am interested in -		Valid%*	n
having healthy snacks available in our	Yes	95.5	148
faith community	No	1.9	3
,	Not sure	2.6	4
having healthy meals served in our	Yes	92.7	114
faith community**	No	4.9	6
,	Not sure	2.4	3
seeing more places to be physically active in our faith community	Yes	92.3	144
	No	2.6	4
, <u> </u>	Not sure	5.1	8
seeing our leaders talk about healthy	Yes	64.7	97
eating and physical activity in	No	24.7	37
sermons , messages or other talks	Not sure	10.7	16
seeing regular classes on physical	Yes	90.4	104
activity or healthy eating offered in	No	3.5	4
my faith community**	Not sure	6.1	7

<sup>\*</sup>Does not include missing values

Table 10: Item Frequencies, Interest in Pa	rucipation in He	earth Activities	
I would like to -		Valid%*	n
participate in health activities before	Yes	49.0	77
services	No	31.2	49
	Not sure	19.7	31
participate in health activities after services	Yes	46.5	72
	No	36.1	56
	Not sure	17.4	27
participate in health activities like physical activity breaks or healthy food	Yes	79.2	99
	No	8.0	10
tastings during regularly scheduled faith community events**	Not sure	12.8	16
**36participants completed the Spanish version of t *Does not include missing values	the pre-test where t	his question was different	

Table 11: Item Frequencies, Preferred Methods for Receiving Health Information				
I would like to -		Valid%*	n	
receive health information that I can	Yes	91.3	147	
read, listen to or watch on my own	No	4.3	7	
	Not sure	4.3	7	
see health information in our	Yes	74.8	113	
bulletins, newsletter and on bulletin boards	No	18.5	28	
boulus	Not sure	6.6	10	
*Does not include missing values				

## Participant Survey (N = 122)

Table 12: Item Frequencies, Participant Demo		
	Valid %*	n
Total	100	122
Gender		
Male	22.3	27
Female	77.7	94
Age		
Under 25	14.7	17
25 - 34	7.8	9
35 - 44	22.4	26
45 - 54	21.6	25
55 - 64	19.0	22
65+	14.7	17
Ethnicity/Race		
African American	51.7	62
Hispanic/Latino	31.7	38
White	6.7	8
American Indian	0.8	1
Asian	0.0	0
Native Hawaiian or Pacific Islander	0.0	0
Other	4.2	5
More than one race	4.9	6
*Does not include missing values		

Table 13: Item Frequencies, Program Effect			
As a result of this program, I -		Valid%*	n
am physically active at least 20	Yes	66.9	79
am physically active at least 30 minutes most days	No	7.6	9
minutes most days	I was already doing this	25.4	30
	Yes	77.7	94
eat smaller portion	No	10.7	13
	I was already doing this	11.6	14
	Yes	68.9	82
eat less fast food	No	7.6	9
	I was already doing this	23.5	28
duint forces colonia containing	Yes	67.8	80
drink fewer calorie containing	No	6.8	8
beverages	I was already doing this	25.4	30
	Yes	60.5	72
prepare and eat more meals at home	No	6.7	8
	I was already doing this	32.8	39
	Yes	54.5	66
eat breakfast most days	No	25.6	31
	I was already doing this	19.8	24
	Yes	62.5	75
eat 2-3 cups of vegetables on most	No	25.0	30
days	I was already doing this	12.5	15
.45 0 66 11	Yes	60.7	71
eat 1.5 – 2 cups of fruits on most	No	25.6	30
days	I was already doing this	13.7	16
. 16 1 6 1	Yes	84.3	102
am more mindful of what and how	No	5.8	7
much I eat	I was already doing this	9.9	12
. 16 1 6 1	Yes	78.3	94
am more mindful of getting physical	No	4.2	5
activity each day	I was already doing this	17.5	21
	Yes	63.6	77
limit screen time for myself	No	19.8	24
	I was already doing this	16.5	20
	Yes	61.1	69
limit screen time for my family	No	22.1	25
	I was already doing this	16.8	19
*Does not include missing values			

## Eat Smart, Move More Member Health and Interest Survey: Pre- and Three Month Post-test Comparison

Table 14: Item Frequencies, Healthy Eating and Physical Activity Habits				
		Pre-test (N=22)	3 Month Post-test (N=25) %*(n)	
Nutrition		%* (n)	/ <sub>0</sub> (11)	
	Yes	36.4 (8)	68.0 (17)	
Eat 2-3 cups of vegetables on most	No	54.5 (12)	28.0 (7)	
days	Not sure	9.1 (2)	4.0 (1)	
	Yes	66.7 (14)	75.0 (18)	
Eat 1.5-2 cups of fruits on most days	No	28.6 (6)	20.8 (5)	
	Not sure	4.8 (1)	4.2 (1)	
Drink regular (not diet) sode every	Yes	27.3 (6)	24.0 (6)	
Drink regular (not diet) soda every day	No	68.2 (15)	76.0 (19)	
	Not sure	4.5 (1)	0.0	
Physical Activity				
I do modorato or vigorous physical	Less than 30 mins	50.0 (11)	41.7 (10)	
I do moderate or vigorous physical activity on most days for	30-60 mins	27.3 (6)	37.5 (9)	
	More than 1 hour	22.7 (5)	20.8 (5)	
*Does not include missing values		•		

Table 15: Item Frequencies, Interest in	Learning About Hea	althy Food and Physica	l Activity
I am interested in -		Pre-test (N=22) %* (n)	3 Month Post-test (N=25) %*(n)
	Yes	95.5 (21)	95.8 (23)
learning about healthy food choices	No	0.0	4.2 (1)
	Not sure	4.5 (1)	0.0
Learning about incorporating fruits	Yes	80.0 (16)	82.6 (19)
learning about incorporating fruits and vegetables into my diet	No	15.0 (3)	13.0 (3)
and vegetables into my diet	Not sure	5.0 (1)	4.3 (1)
learning about healthier food choices	Yes	90.5 (19)	91.3 (21)
and portion size to help manage my	No	4.8 (1)	4.3 (1)
weight	Not sure	4.8 (1)	4.3 (1)
	Yes	86.4 (19)	87.0 (20)
participating in "tasting" events to sample healthy foods	No	0.0	4.3 (1)
sample healthy loods	Not sure	13.6 (3)	8.7 (2)
	Yes	86.4 (19)	83.3 (20)
learning about benefits of physical activity	No	9.1 (2)	8.3 (2)
activity	Not sure	4.5 (1)	8.3 (2)
	Yes	81.8 (18)	75.0 (18)
increasing my physical activity level	No	0.0	8.3 (2)
	Not sure	18.2 (4)	16.7 (4)
	Yes	78.9 (15)	80.0 (20)
walking to increase my physical activity level	No	0.0	20.0 (5)
activity level	Not sure	21.1 (4)	0.0
participating in team activities	Yes	57.1 (12)	68.0 (17)
	No	9.5 (2)	16.0 (4)
	Not sure	33.3 (7)	16.0 (4)
*Does not include missing values			

Table 16: Item Frequencies, Interest in	n Seeing Changes in	the Faith Community	
I am interested in -		Pre-test (N=22) %* (n)	3 Month Post-test (N=25) %*(n)
	Yes	95.2 (20)	95.7 (22)
having healthy snacks available in our faith community	No	0.0	4.3 (1)
our faith community	Not sure	4.8 (1)	0.0
	Yes	90.0 (18)	83.3 (20)
having healthy meals served in our	No	5.0 (1)	16.7 (4)
faith community	Not sure	5.0 (1)	0.0
	Yes	81.8 (18)	80.0 (20)
seeing more places to be physically active in our faith community	No	18.2 (4)	4.0 (1)
	Not sure	0.0	16.0 (4)
seeing our leaders talk about healthy eating and physical activity in sermons , messages or other talks	Yes	63.6 (14)	78.3 (18)
	No	18.2 (4)	17.4 (4)
	Not sure	18.2 (4)	4.3 (1)
seeing regular classes on physical activity or healthy eating offered in	Yes	80.0 (16)	87.5 (21)
	No	10.0 (2)	4.2 (1)
my faith community	Not sure	10.0 (2)	8.3 (2)
*Does not include missing values			

Table 17: Item Frequencies, Interest in Participation in Health Activities				
I would like to -		Pre-test (N=22) %* (n)	3 Month Post-test (N=25) %*(n)	
participate in health activities before services	Yes	50.0 (11)	52.2 (12)	
	No	22.7 (5)	30.4 (7)	
	Not sure	27.3 (6)	17.4 (4)	
participate in health activities after services	Yes	47.6 (10)	52.2 (12)	
	No	33.3 (7)	30.4 (7)	
	Not sure	19.0 (4)	17.4 (4)	
participate in health activities like physical activity breaks or healthy	Yes	77.3 (17)	90.9 (20)	
	No	13.6 (3)	0.0	
food tastings during regularly scheduled faith community events	Not sure	9.1 (2)	9.1 (2)	
**Does not include missing values				

Table 18: Item Frequencies, Preferred Methods for Receiving Health Information				
I would like to -		Pre-test (N=22) %* (n)	3 Month Post-test (N=25) %*(n)	
receive health information that I can read, listen to or watch on my own	Yes	90.9 (20)	96.0 (24)	
	No	0.0	0.0	
	Not sure	9.1 (2)	0.0	
see health information in our	Yes	85.7 (18)	88.0 (22)	
bulletins, newsletter and on bulletin	No	9.5 (2)	4.0 (1)	
boards	Not sure	4.8 (1)	8.0 (2)	
*Does not include missing values				

## **Appendix D: Survey Instruments**

Continued on next page.



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