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Evaluation of the Healthy Food and Beverage Sales in Recreation Facilities and Local Government Buildings Initiative

Submitted to:

Michael Smith Foundation for Health Research

Prepared by:

The University of Victoria, for the Social Research and Demonstration Corporation

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Part 1 – Evaluation Summary



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The Healthy Food and Beverage Sales in Recreation Facilities and Local Government Buildings Initiative (HFBS) is an initiative of the British Columbia Healthy Living Alliance (BCHLA) Healthy Eating Strategy. The goal of the HFBS is to encourage the provision and promotion of healthy food and beverage choices in community recreation facilities and local government buildings. It aims to accomplish this by increasing community capacity for action and the voluntary adoption of the provincial Nutritional Guidelines for Vending in Public Buildings. The initiative was designed to be flexible, based on local context and needs and encouraged action across a broad variety of facility environments and operations including: on-site vending and concessions, programs, special events and external fundraising, staff functions and meetings, public education and promotions, policy and food security initiatives.

The British Columbia Recreation and Parks Association and the Union of British Columbia Municipalities led HFBS. The evaluation was funded through the Michael Smith Foundation for Health Research and implemented by the University of Victoria, in partnership with the Social Research and Demonstration Corporation (SRDC).

In 2009, 22 local governments, including five First Nations, participated in the HFBS initiative. These communities addressed food environments in approximately 80 community-funded facilities, a majority being recreation centres. Each community was provided with a resource toolkit, \$7,500 CDN in grant money, a face-to-face orientation to the project resources, technical supports and evaluation processes and ongoing telephone and website support. The comprehensive evaluation was implemented with local support from recreation staff who gathered information on the facility food environment, vending and patrons, submitted project reports and participated in phone interviews about the implementation process.

Successes

The HFBS served as a catalyst for a number of changes in food environments across a variety of municipal recreation facilities. The HFBS Initiative was successful at facilitating changes in policy, practices, food provision and patron awareness within a relatively short time frame for action. Seventy-five per cent of the goals established by communities were achieved during the eight-month project timeline. Key impacts of the initiative were:

- *Strategic plans and supportive policy for healthy choices:* Enhanced organizational capacity to address the food environment was a key outcome of the HFBS initiative. An organizational assessment showed a notable increase in strategic planning activities. Moreover, 14 communities reported progress on policy development at project end; five of these 14 communities formally adopted a policy within the project timeframe.
- *Improvements in products sold in concessions, snack bars and vending machines:* All communities addressed some aspect of their food sales. The data showed positive changes in food services were made, but were modest across all venues. However, some communities were highly successful in changing their vending product mix while several others substantially improved concession offerings.
- *Increased public awareness and education about healthy eating:* Facilities provided information, signage, handouts and information in regular newsletters and programming.

Many communities also offered educational workshop opportunities and special events to raise awareness around healthy choices (e.g. “healthy product” taste testing). Activities to increase patron buy-in with regards to healthy choices were successful, with a majority of patrons indicating that healthy eating was a priority and that they would support the sale of more healthy selections in the facility. There was a significant increase in patron awareness of healthy choices in the facilities between the start of the initiative and follow-up.

- *Enhanced partnerships:* Recreation personnel partnered with local and provincial government representatives, businesses, food suppliers and distributors, contractors and other community groups to implement the initiative.
- *Serving more healthy food and beverages at programs, events and meetings:* Participants reported serving more healthy options during staff meetings, special events, sports tournaments and programs including children’s camps and out-of-school care.
- *Supportive environments and opportunities for staff to promote healthy choices:* Facilities provided education and training opportunities for staff to learn about the initiative, and policy and environmental changes in the facilities and made it easier for staff to eat healthy at work. Some facilities addressed the broader food environment and initiated community gardens or local food markets.
- Most communities had plans for sustaining the process of change beyond the grant phase.

Implementation

- Critical factors in implementing the HFBS Initiative were technical and resource supports (e.g. grant money), and information sharing (e.g. face-to-face meetings, teleconferences, the Brand Name Food List, and the Stay Active, Eat Healthy Initiative webpage).
- The most common implementation challenges were lack of buy-in from stakeholders (vendors and concessionaires, staff, decision-makers and patrons), fear of revenue loss, being locked into vending/concession contracts, limited human resources (“working off the side of the desk”), short project timeframes and difficulties finding suitable healthy products.
- Participants described the process of changing the food environments in municipal facilities as complex, and indicated that it was best achieved in small steps (e.g. policy implemented in phases), with tangible goals. It required: determination, continual buy-in and monitoring, dedicated money and staff time.
- The amount of time and resources necessary to promote healthy choices in recreation facilities appeared to vary depending on the size and nature of the facility; current state of food provision; and organizational level of readiness and capacity to change.

First Nations Community Action

First Nations communities were unique. Typically they had: less food “sales” venues and/or facilities dedicated to recreation, more community-wide events where food was served, and were located in more rural and/or remote areas in comparison to the non-First Nations communities in the evaluation. Thus, they focused on broader community approaches to food provision and community engagement rather than on a facilities or food sales. Each First Nations community

achieved at least one major goal and in some cases more than they had originally planned for. The following are examples of the successes:

1. establishing a healthy school lunch program;
2. building a community garden and increasing access to fresh produce in a rural area;
3. running a “Drop the Pop” community challenge and helping individuals decrease their intake of sugar-sweetened beverages through monitoring, support and incentives;
4. developing a healthy eating policy to govern what foods are served in community buildings and at local events and meetings; and
5. providing healthy cooking classes to community members.

In addition, all five communities reported providing educational opportunities for community members (and particularly local caterers) to increasing awareness about health food and beverage choices. In most cases, these opportunities were already available in the community, but were enhanced by the grant initiative and supports. Collectively, communities reported that the initiative had:

- increased awareness and education;
- increased healthy choices served at community events, meals and meetings;
- increased access to fresh produce;
- improved health (establishing healthy body weights, improving student focus);
- increased sense of community autonomy and pride; and
- positively influenced other areas of the community where food was served.

Summary

The broad food environment model adopted by HFBS allowed each community to work on change where there was both readiness and capacity to make changes to healthier foods and beverages. The implementation activities varied across sites and occurred in different areas, ranging from changes in vending and food sales to food policy for children’s camps and food security (building community gardens).

Communities reported that participation in the initiative had provided the essential information, support and motivation to make a positive difference in the food and beverage environment, but more time would be needed to fully achieve their goals and compliance with the provincial guidelines. Everyone stressed that change takes time, occurs in stages, and requires ongoing dedicated resources. Transitioning to healthy choices in municipal buildings provided many complex challenges; however, these challenges are not uncommon to other public health oriented social change initiatives.

Changing recreation facility food environments is a public health priority. The HFBS Initiative addressed this priority and proved to be a feasible and effective approach to facilitating change. It was founded on extensive engagement of, and consultation with, public health, recreation and industry stakeholders and provided high levels of communication and support. This is a novel intervention that has provided substantial information about how to successfully

promote healthy food and beverage choices in municipal recreation and community environments.

Evaluation Reports

The evaluation findings are provided in two reports: the first includes the HFBS Phase II facilities and the second includes the HFBS Phase II First Nations communities.

Evaluation of the Healthy Food and Beverage Sales in Recreation
Facilities and Local Government Buildings Initiative

**Part 2 – Facilities Technical Report:
Phase II Evaluation**



Submitted to:
Michael Smith Foundation for Health Research

Prepared by:
The University of Victoria, for the Social Research and Demonstration Corporation

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Executive Summary

This report documents the evaluation findings of the second grant phase of the Healthy Food and Beverage Sales in Recreation Facilities and Local Government Buildings Initiative (HFBS) of the British Columbia Healthy Living Alliance (BCHLA).

The BCHLA's Food and Beverage Sales in Recreation Facilities and Local Government Buildings Initiative adopted and adapted a pre-established food environment model and toolkit developed by the University of Victoria to facilitate change in municipal recreation facilities. The lead for the HFBS Initiative was entrusted to the British Columbia Recreation and Parks Association and the Union of British Columbia Municipalities. The project aimed to:

1. build organizational and community capacity for action;
2. provide support to local government buildings and recreational facilities to encourage the voluntary adoption of the healthy food and beverages guidelines for public buildings; and
3. encourage the provision or promotion of healthy options in all areas of recreation operations (e.g. children's programs and events).

In February 2009, 17 communities across BC applied to participate in Phase II of the HFBS Initiative. Once their application was accepted, each community was provided with a toolkit, support resources, grant money (\$7,500 CDN) and training on how to complete the evaluation. The purpose of evaluating the community projects was to:

1. describe what activities were undertaken;
2. determine the impact of the HFBS Initiative on the food environment, patrons' choices, and policy and planning capacity;
3. identify key issues related to implementation; and
4. act as a catalyst to support communities in the planning and process of making sustainable changes.

The evaluation data was provided by the communities over a 10-month timeframe.

Implementation of the HFBS Initiative varied across sites and occurred in different areas related to recreation, ranging from changes in vending and food sales to food policy for children's camps and food security (building community gardens). The broad food environment model adopted by HFBS allowed each community to work on change where there was both readiness and capacity to make changes towards healthier food and beverage choices.

The evaluation data showed that the initiative was successful at facilitating changes in policy, processes, practices and patron awareness. A key area of success was in the area of policy development, laying the foundation for ongoing change. Twelve communities set a goal at the outset of their project that related to policy development. Of the 17 communities, 14 reported that they achieved goals in this area. The breadth of policy activity was substantive, ranging from policy-guiding product mix, to promotion and pricing and guidelines for food provision in programs and events. Surprisingly, many changes occurred without policy in place as well.

Every community set out to address the provision of healthy options in the key food service areas of vending and/or concessions. Changes in food services were modest overall; however, data showed that some individual communities were highly successful in changing their vending product mix while others improved their concession offerings. Challenges to progress in these areas included contract timeframes, partnership building with vendors and concessionaires, limited time and human resources and difficulty sourcing suitable healthy product choices.

Enhanced organizational capacity to address the food environment was also a key outcome of the HFBS Initiative. Efforts were directed at multiple levels and staff and contractors within the municipal recreation facilities were made aware of, and trained to change, the food environment to include healthier options. Plans for continuing the process of change are in place.

Another area of community success was enhancing patron knowledge and awareness of healthy eating, and achieving their buy-in to the changes. Many activities to increase patron buy-in (like taste-testing new vending or concession offerings) were planned, and the evaluation showed a positive shift in patron awareness of healthy eating initiatives as a result.

Buy-in from the staff, decision-makers and members of the public who used the recreation facilities, as well as technical and resource supports for changing to healthier food options were critical factors in implementing HFBS. This “real world” intervention was not without its challenges, but these challenges are common to other public health oriented social change initiatives. All the communities that participated in this evaluation stressed that change takes time, occurs in stages and requires dedicated resources.

One of the strengths of the evaluation was that it reflected the “real world” setting of publicly funded recreation and the input of relevant stakeholders in its design, thereby enhancing its external validity. It also relied on multiple sources and types of data allowing for both an in-depth understanding of the context for implementation and for corroboration of the findings.

Changing recreation facility food environments is a public health priority. The HFBS Initiative addressed this priority and proved to be a feasible and effective approach to facilitating change. It was founded on extensive engagement of and consultation with public health, recreation and industry stakeholders and provided high levels of communication and support. This is a novel intervention that has provided substantial information about how to successfully promote healthy food and beverage choices in municipal recreation.

Evaluation of the Healthy Food and Beverage Sales in Recreation
Facilities and Local Government Buildings Initiative

**Part 3 – First Nations Communities Report:
Catalyzing Community Food Action**



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Prepared by:
The University of Victoria, for the Social Research and Demonstration Corporation

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Executive Summary

The BC Healthy Eating Strategy was developed and formally adopted by the BC Healthy Living Alliance (BCHLA) in May 2007 as one of four targeted approaches to health promotion in the province. One of the goals of the strategy was increase the availability of healthy choices, consumption of healthy choices, and skills related to making healthy choices in environments where families live, learn, work, and play.

The Healthy Food and Beverage Sales (HFBS) Initiative was lead by the British Columbia Recreation and Parks Association (BCRPA) and aimed to build community capacity for action and provide support to encourage the provision or promotion of healthy options. In addition to 17 municipalities that received funding to address recreation facilities, five First Nations communities were awarded grants of \$7,500 CDN to implement the initiative in Phase II.

An evaluation of the First Nations initiative was conducted between February and December 2009 by the University of Victoria in partnership with the Social Research and Demonstration Corporation (SRDC). The purpose of the evaluation was to determine the activities, impact, key implementation issues of the HFBS Initiative in the five First Nations communities and to act as a catalyst to encourage communities in the process of making sustainable changes. The evaluation process included three main components:

1. a before and after community overview assessment;
2. a monthly phone check-in; and
3. a final interview with project staff in each community.

The community overview was a self-rating assessment tool designed to look at capacities in the areas of planning, environments, and communications. Data collection was supplemented with monthly phone conversations so that project coordinators could share their community process and stories of change, challenges, and success. Input from the phone conversations was recorded in note form by the evaluator and explored for common themes and unique achievements and issues. The findings from this process are presented in this report.

Project coordinators completed the community overview assessment and rated their communities' current level of healthy eating capacity at the beginning and end of their initiative. Results showed that communities reported an increase in capacity and support for healthy eating between the start and end of their initiative across all categories, including strategic planning, supportive environments and communication and education.

The HFBS First Nations Community Initiative made an impact on nutrition awareness and capacity for change. Although each community began their initiative from very different starting points, a majority of their goals and hopes for their projects were achieved. A diverse range of activities were carried out across the communities, including providing healthy cooking classes, training catering staff, implementing a healthy school lunch program, building a community garden and increasing awareness and education around healthy eating.

Communities indicated that the HFBS Initiative had contributed and reinforced positive change in the following areas:

- increased awareness and education;

- increased the number of healthier choices served;
- improved access to fresh produce;
- increased children’s focus in school;
- improved the health of individuals;
- increased sense of community pride; and
- created a positive ripple effect into other areas of the community where foods are served.

The challenges encountered in the process of their project as reported by communities included:

- obtaining the buy-in or support from community leaders, caterers and community members;
- engaging community members;
- gaining and keeping community members interested and involved;
- managing turn-over and level of training of project staff;
- maintaining cost and accessibility of healthy options;
- working in a culture of junk food (e.g. prevalence of pop and “junk foods”);
- delays around policy approval; and
- implementing the initiative during a time of change and transition in the community.

Things that helped to facilitate implementation of changes to support healthy eating as reported by communities included:

- community engagement and support from leaders, caterers and community members;
- involvement of community health workers and dietitians;
- project resources and supports including grant funding, Healthy Food Guidelines and the Brand Name Food List;
- the fact that there was a project focus and defined goal for the initiative; and
- the evaluation process and the supports provided.

Communities reported being satisfied with the HFBS grant and the support that accompanied it. These supports included individual technical support, inter-community knowledge sharing, and consultation provided by the HFBS project coordinator and evaluation team. However, the need for resource materials specifically designed for First Nations communities was highlighted.

Although these findings should be interpreted in light of the limitations of the evaluation (use of self-report, lack of comparison communities and high variability across communities) they show that the HFBS First Nations Initiative served as a catalyst for community action for healthy food and beverage choices. Sustaining the momentum will require ongoing dedicated resources within the community and support for community champions.