

**Policy, Systems, and
Environmental Strategies
Generated by Participants to
Support Family Food Security in
Rural Communities:
*Final Report***

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About Us

The Gretchen Swanson Center for Nutrition

Founded in 1973, the **Gretchen Swanson Center for Nutrition** is a national nonprofit research institute providing expertise in measurement and evaluation to help develop, enhance and expand programs focused on healthy eating and active living, improving food security and healthy food access, promoting local food systems and applying a health equity lens across all initiatives. The Gretchen Swanson Center works nationally and internationally, partnering with other nonprofits, academia, government and private foundations to conduct research, evaluation and scientific strategic planning.

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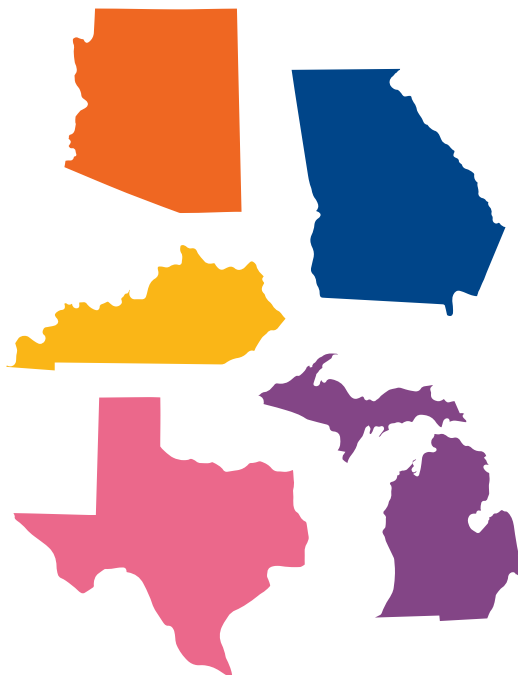
Executive Summary

Rural communities in the U.S. experience high rates of food insecurity due to a myriad of factors, including lower economic mobility, limited healthcare services, fewer housing and employment opportunities, and reduced access to affordable healthy food at grocery stores.^{1,2} The Gretchen Swanson Center for Nutrition (GSCN) and Share Our Strength (SOS) worked with practitioners and families in rural communities to co-develop a prioritized list of policy, systems, and environmental strategies (PSE) to support family's food security in rural communities.

The aims of this project include:

- 1 Co-develop 13 PSE strategies to support family's food security in rural places with family participants' and practitioners' recommendations.
- 2 Prioritize which PSE strategies will make the greatest impact in rural communities to support family's food security.

To address these aims, the research team conducted a three-phase Delphi study including participants from **Arizona, Georgia, Kentucky, Michigan, and Texas:**



STEP 1

- Interviews were conducted with 30 practitioners serving rural communities and 42 family participants living in a rural community.
- 14 SOS staff and four GSCN staff co-developed 13 strategies and activities that emerged from the interviews.



STEP 2

- Surveys were completed by 26 family participants, 12 practitioners, and eight SOS staff. Surveys were scored to identify support for the acceptability, appropriateness, feasibility, and timelines for the 13 strategies and activities in rural communities.



STEP 3







Focus groups were facilitated with 10 family participants, five practitioners, and seven SOS staff to discuss support for the acceptability, appropriateness, feasibility, and timelines for strategies in rural communities.



Table 1 summarizes the scores for level of support of each of the 13 strategies within each participant group. The report summarizes the data collected and overall conclusions about which strategies participants scored highest for acceptability, appropriateness, feasibility. In addition, it includes a timeline of when to address each strategy.

Table 1. Level of support[†] and areas of consensus or no consensus for each strategy among groups

Policy, systems, and environmental strategies*	Rural family participants speaking English ^{‡§}	Rural family participants speaking Spanish ^{‡§}	Practitioners serving rural areas ^{‡§}	Share Our Strength staff (SOS) ^{‡§}
Make it easier to sign up for programs				
Make people more aware of services		●		
Make it trouble free for people to use programs				
Expand employment				
Make it easier to get from place to place				
Make housing more affordable				
Provide chances for people to suggest changes to programs	●			
Expand school nutrition programs	●	●		
Increase access to affordable health care	●		●	
Expand food banks			▲	▲
Make childcare options and early childhood education better fit the needs of families	●	●	●	
Provide options for people to learn about buying and making healthy foods on a budget	▲	●		▲
Provide more places to get food locally	●	●	●	●

 Very high support	 Moderate support	 Not discussed in focus groups	 No consensus in focus groups
 High support	 Low support		

*The 13 policy, systems, and environmental strategies were generated during interviews with 30 practitioners and 42 family participants of rural areas in Arizona, Georgia, Kentucky, Michigan, and Texas.

[†]A subset of interview participants and SOS staff participated in the Delphi Panel (survey then focus group) to indicate their level of support for prioritizing strategies. These included 18 rural family participants speaking English, eight rural family participants speaking Spanish, 12 practitioners serving rural areas, and eight Share Our Strength staff.

[‡]The color of each box is associated with results from the Delphi Panel surveys. Colors indicate the weighted score for overall acceptability, appropriateness, and feasibility of a strategy. No dot indicates that consensus was reached.

[§]The overlay is associated with the Delphi Panel focus groups. They indicate whether consensus was reached on prioritizing the strategy, more discussion is needed about prioritization, or it was not discussed in the focus group. These included seven rural family participants speaking English, three rural family participants speaking Spanish, five practitioners serving rural areas, and seven Share Our Strength staff.

Overall, the strategies with greatest support from the survey and those which mostly reached consensus during the focus groups to prioritize were: *Make it easier to sign up for programs, make people more aware of services, make it trouble free for people to use programs, expand employment, make it easier to get from place to place, make housing more affordable.*

Three strategies did not reach consensus on the prioritization: *make childcare options and early childhood education better fit the needs of families, provide options for people to learn about buying and making healthy foods on a budget, and provide more places to get food locally.*

This project worked with rural practitioners and families, plus Share Our Strength, to identify acceptable, appropriate, and feasible PSE strategies and associated activities, as well as prioritize them for family food security in rural communities. The 13 PSE strategies and associated activities resulting from this project indicate that supporting food security for families in rural communities requires a comprehensive approach across multiple sectors.

PSE strategies and associated activities were wide-ranging, from making it easier for people to sign up for programs to expanding employment to increasing access to affordable health care. Clearly, a multi-pronged approach to align policies, systems, and environments that support family food security in a way that is acceptable, appropriate, and feasible for rural communities is necessary. With these findings in hand, Share Our Strength has direction to leverage its diverse network of partners to plan and implement strategies for family food security in rural communities.



When planning for and implementing the PSE strategies and activities in rural communities, leveraging assets and working with challenges to tailor programming for local communities is essential.

The following shows overarching recommendations that were gathered from the three step process, along with ideas for a few possible next steps:

Families in rural communities desire to be self-sufficient and, when needed, draw upon trusted people and organizations from the local community.

A concerted effort to increase social service awareness is needed for families.

Determine what supports are available and wanted in a community to help families.

Planning and implementation of PSE strategies and activities should be inclusive and depend upon the rural community's assets and needs.

Overall, practitioners and families in rural areas have important messages to share. Each participant group relayed different perspectives and priorities based upon their own positionality to the rural communities. Together, these key audiences should be actively engaged in policy, systems, and environmental change work in their local community to develop meaningful solutions for family food security.

Introduction

Food insecurity—inconsistent access to enough food for everyone in a household to live an active and healthy life—impacts 34 million people in the United States (U.S.)³ Further, households with children are more vulnerable to food insecurity, as 12.5% of households with children in the U.S. are food insecure compared to 9.5% of households without children.⁴ Food security is one social determinant of health (SDOH)—the conditions and situations within which people are born, live, work, and play that impact health. Addressing this particular SDOH is a priority of the U.S. as outlined in Healthy People 2030.⁵

Rural communities, which comprise approximately 14% of the U.S.,⁶ experience higher rates of food insecurity due to a myriad of factors, including lower

economic mobility, limited healthcare services, fewer housing and employment opportunities, and reduced access to affordable healthy food at grocery stores.² Using the most updated Census Bureau urban and rural classification when the study was designed, an urban area is defined as an area with 50,000 or more people, while rural encompasses all populations, housing, and territory not included within an urban area.⁷ As shown by the Food Research & Action Center, 12.1% of households in rural areas are food insecure compared to the 10.3% of households in metropolitan areas.⁸

Policy, systems, and environmental (PSE) strategies are designed to address root cause issues by making changes that support healthy and inclusive communities (**Table 2**).⁹

Table 2. Policy, systems, and environmental strategies and examples

Definition	Example related to food security
Policy changes occur at legislative and organizational levels and include laws, ordinances, regulations, and rules that aim to influence positive behaviors. ¹⁰	Expand the eligibility criteria for food assistance programs such as Supplemental Nutrition Assistance Program (SNAP). ¹¹
System changes occur at an institutional or organizational level and affect operations, purpose, and function. ⁹	Updating online shopping portals among a chain of grocery stores to allow online Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) purchases. ¹²
Environmental changes involve economic, social, or physical changes to surroundings that impact public health outcomes. ⁹	Offering a farmer’s market at a health clinic. ¹³

In 2018, Share Our Strength (SOS) and Feeding America commissioned a qualitative study that investigated the difficulties parents in rural communities encountered when trying to provide food for their kids across six states.^{1,14} Participants offered several struggles and coping strategies for achieving food security within their household and community. Insights provided across the 2018 study provided valuable information from which to build a rural strategy, but there was limited information about which PSE strategies to prioritize in rural communities. **Thus, the purpose of this study was to provide SOS with co-created PSE strategy priorities for future work in rural communities.**

The Gretchen Swanson Center for Nutrition (GSCN) has years of experience measuring and evaluating mixed methods data, including qualitative and quantitative findings among diverse priority populations, including in rural areas.

The aims of this project include:

- 1** Co-develop PSE strategies to support family’s food security in rural places with family participants’ and practitioners’ recommendations.
- 2** Prioritize which PSE strategies will make the greatest impact in rural communities to support family’s food security.

Methods

Study Design

This study used three steps of data collection (interviews, a survey, and focus groups) for optimal participation and to explore areas of consensus or lack of consensus about PSE strategy priorities.¹⁵

The study’s principal investigator, Carmen Byker Shanks at GSCN, worked on the 2018 qualitative study team and generated the current study’s concept with SOS in 2021.^{1,14} The study design details iteratively evolved with input from the research team, SOS, and participants from 2021-2023. The interviews were approved by Montana State University’s Institutional Review Board (IRB) study #2022-738-CBS051122-EXEMPT.

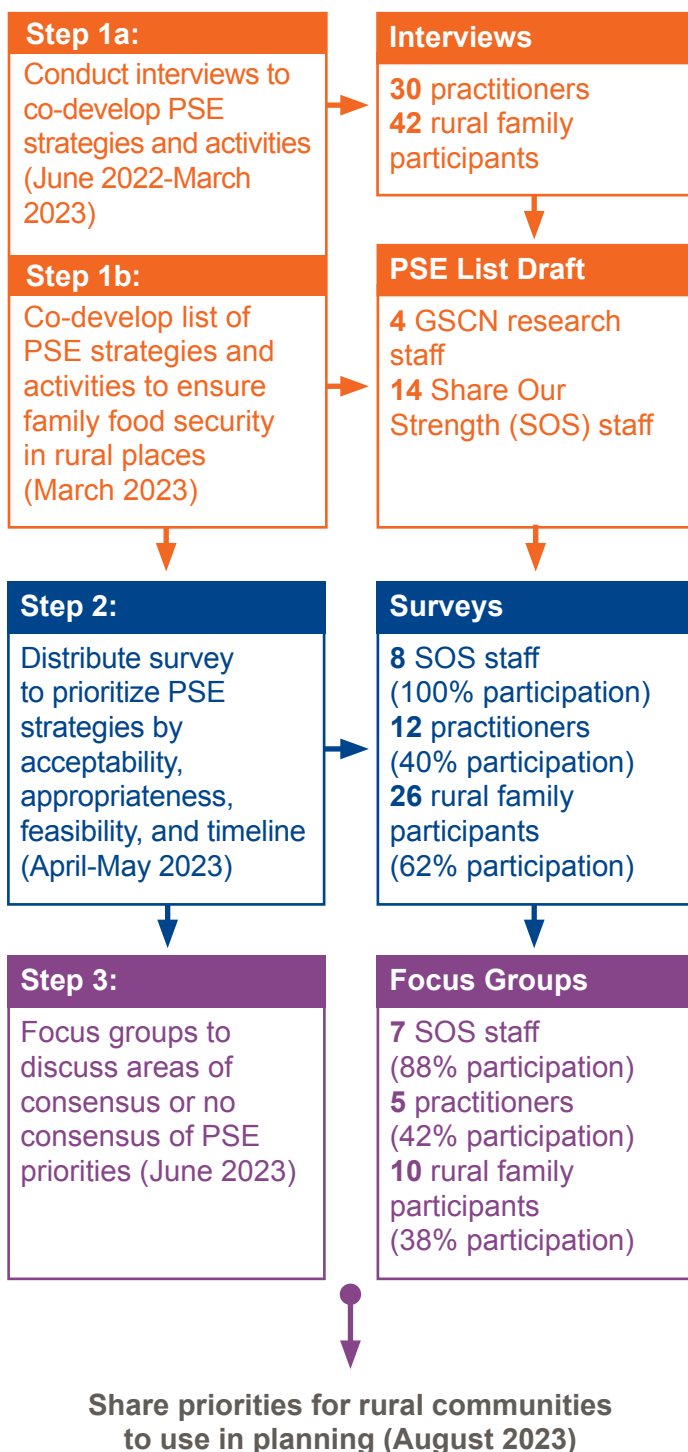
University of Nebraska Medical Center’s IRB deemed that the survey and focus group does not constitute human subject research as defined at 45CFR46.102.

The three rounds included:

- 1 Interviews
- 2 Survey
- 3 Focus groups (See Figure 1)



Figure 1. Overview of study design for policy, systems, and environmental strategies (PSE) generated by participants in rural areas of Arizona, Georgia, Kentucky, Michigan, and Texas



Note: All participants from step one were invited to take the survey in step two. All participants from step two were invited for the focus groups in step three.

SOS staff and GSCN co-created a list of practitioner contacts who work in the priority states of Arizona, Georgia, Kentucky, Michigan, and Texas. These states were selected based on existing SOS partnerships, an intention to garner perspectives from varied regions of the U.S., presence of rurality, and demographic diversity. The Census Bureau defines urbanized areas as having 50,000 or more people, urban clusters between 2,500 and 50,000 people, and rural is all population, housing, and territory not included within an urban area.⁷ We also utilized the National Center for Education Statistics Locale Classifications when questions about rurality arose.¹⁶ Acronyms used in this report are defined in **Table 3**.

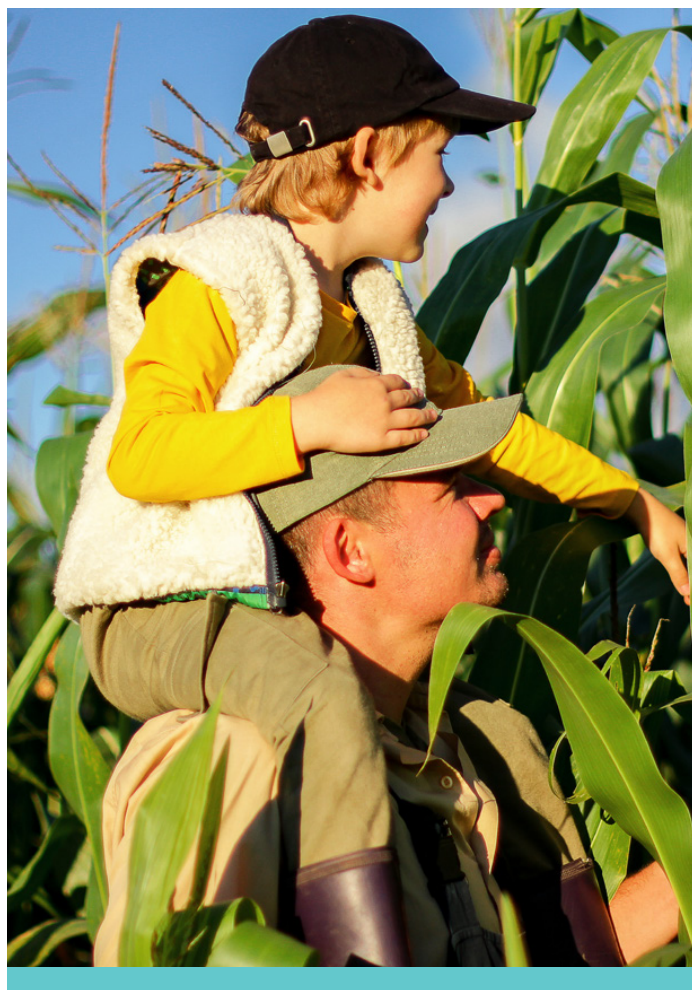


Table 3. List of acronyms used in this report

Acronym	Definition
AZ	Arizona
CACFP	Child and Adult Care Food Program
EBT	Electronic Benefits Transfer
EITC	Earned Income Tax Credit
FDPIR	Food Distribution Program on Indian Reservations
GA	Georgia
GSCN	Gretchen Swanson Center for Nutrition
KY	Kentucky
LIHEAP	Low Income Home Energy Assistance Program
MI	Michigan
NSLP	National School Lunch Program
PSE	Policy, systems, and environmental
SBP	School Breakfast Program
SCHIP	State Children’s Health Insurance Program
SDOH	Social determinants of health
SNAP	Supplemental Nutrition Assistance Program
SOS	Share Our Strength
SSDI	Social Security Disability Insurance
SSI	Supplemental Security Income
TANF	Temporary Assistance for Needy Families
TX	Texas
U.S.	United States
USDA	United States Department of Agriculture
WIC	Special Supplemental Nutrition Program for Women, Infants, and Children
YMCA	Young Men’s Christian Association

Interview Methods

First, all practitioners completed a survey ([Appendix A](#)) to determine eligibility to participate in interviews, collect basic sociodemographic information and ensure their work served a rural audience. Practitioners met the eligibility criteria if the organization they worked at prioritized serving rural families, and practitioners from nutrition (e.g., school lunch program) and other social supports (e.g., housing assistance) sectors of employment were invited. Next, practitioners were invited to participate in an interview about their work with families in rural communities (see [Appendix B](#) for interview guide). The interview guide was co-developed between GSCN and SOS staff to include PSE-related questions that elicit contextual information important to the practitioner and rural perspective.

Topics included:

- 1 Acquiring resources and food in a rural community;
- 2 Social service program awareness ([Table 4](#));
- 3 Organizational and community capacity to address food security; and,
- 4 Stigma, racism, and language barriers.

All phone interviews were audio recorded and transcribed verbatim by Otter.ai program. Practitioner phone interviews ranged in length from 31 to 66 minutes. At the end of each interview, practitioners were asked to help recruit eligible family participants by sharing recruitment flyers with the communities that they served or sharing contact information for individuals or locations that serve rural families.

Table 4. Social service programs and definitions

Non-food social service	Definition
Direct cash payments, also known as stimulus checks	Direct cash payments to lower-and middle-income Americans of \$1,200 for each adult and \$500 for each child during COVID-19 ¹⁷
Early childcare education	Programs that assist families in with early childcare education such as Head Start or Early Head Start ¹⁸
Earned Income Tax Credit (EITC)	A refundable tax credit for low- to moderate-income working households, particularly those with children ¹⁹
Low Income Home Energy Assistance Program (LIHEAP)	Assists eligible low-income households with their heating and cooling energy costs ²⁰

Each state had goals to achieve diversity in race and ethnicity based upon the populations that they serve.

All interested family participants completed an eligibility survey ([Appendix A](#)). Family participants met the eligibility criteria if they: had at least one child under age 18 in the household, lived in a rural place, and received support from at least one income-based social service. The eligibility survey also collected basic sociodemographic information. English-speaking and Spanish-speaking family participants were recruited, and all study materials were available in both languages (see [Appendix C](#) for family interview guide). The interview guide was co-developed between GSCN and SOS staff to include PSE-related questions that elicit contextual information important to the rural resident perspective.

Topics included:

- 1 Acquiring resources and food in a rural community;
- 2 Social service program awareness ([Table 4](#));
- 3 Household food security related experiences; and,
- 4 Stigma, racism, and language barriers.

Following the same methods described above for practitioner interviews, all family phone interviews were audio recorded and transcribed verbatim by Otter.ai program. Family phone interviews ranged in length from 17 to 58 minutes.

Non-food social service	Definition
Medicaid	A healthcare insurance program for Americans with limited income, and in some cases, limited financial assets ²¹
Rental assistance, including emergency rental assistance	Programs that help tenants find places to live and pay rent ²²
Social Security	Provides protection against the loss of earnings due to retirement, death, or disability ²³
Social Security Disability Insurance (SSDI)	Pays benefits to individuals if they are “insured” meaning that they worked long enough, and recently enough, and have paid Social Security taxes on earnings ²⁴
The State Children’s Health Insurance Program (SCHIP)	Provides insurance for children whose families earn too much to qualify for Medicaid, but who cannot afford private insurance ²⁵
Supplemental Security Income (SSI)	Pays benefits to adults and children with disabilities who have limited income and resources ²⁶
Temporary Assistance for Needy Families (TANF)	A time limited program which assists families with children when the parents or other responsible relatives cannot provide for the family’s basic needs ²⁷
Tax credits, including child tax credits	Tax incentive which allows certain taxpayers to subtract the amount of the credit they have collected from the total they owe the state ¹⁹
Unemployment Benefits	Employer and government paid program that provides temporary, partial income replacement to qualified individuals who are unemployed ²⁸
Food-related social services	Definition
After school meal programs	Programs that offer free meals and snacks to children during after school hours
Child and Adult Food Care Program (CACFP)	Provides free meals and snacks to eligible children and adults who at participating child care centers, day care homes, and adult day care centers ²⁹
Food Distribution Program on Indian Reservations (FDPIR)	Provides food to income-eligible households living on Indian reservations or nearby areas and is sometimes used as an alternative to SNAP because there is no easy access to SNAP offices or stores ³⁰
School meal programs including free or reduced price lunch or breakfast, Pandemic-Electronic Benefits Transfer (EBT), summer meal programs	The National School Lunch Program (NSLP) ³¹ and the School Breakfast Program (SBP) ³² provides meals at low-cost or free to children each school day
Special Supplemental Nutrition Program for Women, Infants, and Children (WIC)	A federal program that provides supplemental foods, health care referrals, and nutrition education for low-income pregnant, breastfeeding, and non-breastfeeding postpartum women, and to infants and children up to age five ³³
Supplemental Nutrition Assistance Program (SNAP)	A federal program that provides an EBT card for eligible families to buy groceries ³⁴

To analyze the interviews, the research team first reviewed transcripts and developed a codeguide. The codeguide was made using an asset-based approach to capture the capacity, skills, knowledge, connections, and potential around PSE strategies which exist in a community.^{35,36} Recent research highlights the importance of an asset-based approach to challenge health inequities, value resilience, strengthen community networks, and recognize local expertise.³⁵ Next, a rapid qualitative approach with directed content analysis was used to organize findings for the interview themes.^{37,38} This method included: one trained researcher independently extracted meaning units from the interview transcripts using the codeguide, a second trained researcher reviewed the transcripts for any missing meaning units, and meaning units were organized into themes iteratively and through agreement among the research team. Following, the research team reexamined all transcripts for mention of policy, systems, and/or environmental approaches to ensure family food security in rural places. Together, the research team developed the list and organized into PSE strategies with associated activities. Finally, for the sociodemographic and social service program interview questions, descriptive statistics were calculated for both practitioners and family participants.

Interim interview results were presented to SOS staff. Feedback from SOS staff was incorporated in constructing a list of 13 PSE strategies to ensure family food security in rural places. Each strategy includes activities derived from interviews that help to accomplish the overall strategy. The list of PSE strategies and activities went through an iterative feedback loop with SOS staff and GSCN staff to ensure that the strategies and activities aligned, and the descriptions were clear and concise.

Online Delphi Survey

To rank and prioritize the 13 PSE strategies (along with example activities), a two-step Delphi Panel was used.^{15,39} Delphi Panels are designed to facilitate group consensus through four basic principles: anonymity of participants, iteration of the topic, controlled feedback of responses, and aggregation of responses.¹⁵

First, an online Qualtrics survey was sent to all interviewed practitioners and family participants, as well as a team from SOS that worked with rural communities (see **Appendix F**).

Acceptability, appropriateness, and feasibility were applied as ranking constructs because they are leading factors in intervention implementation success.^{40,41}

The sections included:

- 1 Rank the acceptability, appropriateness, feasibility of 13 PSE strategies with response options of neither agree nor disagree, completely disagree, disagree, agree, or completely agree;
- 2 Rank top three PSE strategies to address within the next: two years, two to five years, and five or more years; and,
- 3 Add any missing PSE strategies.



Acceptability

The likability of the strategy in rural communities



Appropriateness

Whether the strategy is a good match in rural communities



Feasibility

How possible the strategy is in rural communities

The online Delphi survey was open for a total of two weeks. Weighted scores were calculated for the 13 PSE strategies within and across each participant group according to acceptability, appropriateness, feasibility, and overall (acceptability, appropriateness, feasibility). Scales were weighted as follows: neither agree nor disagree=0, completely disagree=1, disagree=2, agree=3, and completely agree=4. Scores were calculated in two corresponding ways. First, each participant's response was assigned the scale value, summed with all participant's responses, and divided by the total number of responses. Here, acceptability, appropriateness, and/or feasibility were divided into levels of support: low (0.00-2.00), moderate (2.10-2.68), high (2.70-3.40), and very high (3.41-4.00). Second, each participant's response was assigned a value, summed with all participant's weighted response, and divided by the total possible weighted value of all participants' responses. Overall acceptability, appropriateness, and feasibility were divided into levels of support: low ($\leq 50\%$), moderate (51-67%), high (68-84%), and very high ($\geq 85\%$). Although the two approaches are interchangeable, the second approach to score calculation was used in focus groups to relay level of support with participants in a more graspable way. In both approaches, low corresponds to neither agree nor disagree, completely disagree, or disagree responses. Moderate, high, and very high are split into thirds across the remainder of the scale/levels for agree and completely agree. Next, the frequency in which participants ranked each strategy for the time- bounded priorities were calculated within and across each participant group. The open text box of missing strategies were qualitatively summarized.

Delphi Focus Group

Second, a total of four online focus groups were conducted—one focus group for each participant group—SOS staff, practitioners, family participants speaking English, and family participants speaking Spanish. The purpose of the focus group was to determine where:

- Consensus or non-consensus was reached on the strategy and associated activities within the group; and,
- Consensus or non-consensus occurred within each strategy and associated activities across groups.

Consensus was defined as measuring the level of agreement of individual statements which provides group opinion and the extent to which participants agree with each other, which then informs group opinion.¹⁵ All participants completing the survey were invited to participate in a focus group. Each focus group was facilitated using a semi-structured guide (see [Appendix G](#)) and PowerPoint slides with the results from the survey. All focus groups were approximately one hour in length. To gain representation from all five states per participant group, the PowerPoint slides along with questions were sent to the two practitioners completing the survey in Michigan, and one Michigan practitioner provided written feedback. Participants were encouraged to guide the discussion, therefore not all of the strategies were discussed in each group.

Focus groups were transcribed verbatim. A codeguide was developed which included codes for the 13 PSE strategies, consensus, non-consensus, and new activities. Two, independent researchers coded each transcript and met to reconcile meaning units of consensus or non-consensus within groups. One researcher remained a consistent coder across all transcripts, coding all four transcripts. Once all transcripts were coded, areas of consensus or non-consensus were discussed within and across groups and agreed upon by the research team.

Results

Interview Results

Interviewee Characteristics

A total of 30 practitioner and 42 family interviews were conducted. Of the family interviews, a total of ten were in Spanish and 32 were in English.

Table 5 shows practitioner and family participant demographics.

A total of six practitioners represented each state, with an average age of 47 years old. The majority (83%) of the practitioners interviewed were White, followed by Black and African American (10%), Hispanic (3%), and more than once race (3%). According to the USDA 6-item food security screener⁴², practitioners self-reported their food security as high (70%), marginal (7%), low (17%), and very low (7%).

Practitioners were employed in nutrition (39%) and other relevant (59%) sectors. See **Table 5** for types of employment organizations.

A total of 42 family participants were interviewed, with an average age of 37 years old. Ten family participants were interviewed in Spanish, and 32 family participants were interviewed in English. The employment status of family participants included not employed (49%), employed full-time (43%), and employed part-time (7%). Family participants were Hispanic (40%), White (36%), Black and African American (10%), more than one race (10%), and American Indian (2%).

The education of family participants included less than a high school degree (26%), a high school degree (26%), some college with no degree (29%), associate's degree (5%), bachelor's degree (12%), and master's degree (2%). The food security status of family participants included high food security (17%), marginal food security (14%), low food security (29%), and very low food security (36%).

Table 5. Practitioner and family participant demographic characteristics

Demographic characteristic	Number of practitioners n (%)	Number of family participants n (%)
State of residence		
Arizona	6 (20%)	8 (19%)
Georgia	6 (20%)	10 (24%)
Kentucky	6 (20%)	8 (19%)
Michigan	6 (20%)	8 (19%)
Texas	6 (20%)	8 (19%)
All states	30 (100%)	42 (100%)
Age (Average)	47 years	37 years
Employment status*		
Full-time	28 (93%)	18 (43%)
Part-time	2 (7%)	3 (7%)
Not employed	0 (0%)	20 (49%)
Racial and ethnic background*		
American Indian	0 (0%)	1 (2%)
Black and African American	3 (10%)	4 (10%)
Hispanic	1 (3%)	17 (40%)
More than one race	1 (3%)	4 (10%)
White	25 (83%)	15 (36%)
Education		
Less than high school	0 (0%)	11 (26%)
High school degree	0 (0%)	11 (26%)
Some college, no degree	6 (20%)	12 (29%)
Associate's degree	1 (3%)	2 (5%)

Demographic characteristic	Number of practitioners n (%)	Number of family participants n (%)
Bachelor's degree	9 (30%)	5 (12%)
Master's degree or above	13 (43%)	1 (2%)
Prefer not to answer	1 (3%)	0 (0%)
USDA Food Security Module ⁴²		
High food security	21 (70%)	7 (17%)
Marginal food security	2 (7%)	6 (14%)
Low food security	5 (17%)	12 (29%)
Very low food security	2 (7%)	15 (36%)
Area of employment†		
Community family resource	10 (33%)	-
School nutrition	7 (23%)	-
Food bank	4 (13%)	-
Department of health	3 (10%)	-
Extension	3 (10%)	-
Food systems	1 (3%)	-
Planning and regional development	1 (3%)	-
Health care	1 (3%)	-

* Question based on 30 practitioners and 41 family participants as one family participant did not respond

† Question was only asked to practitioner and not to family participants

Interview Themes

Emergent themes included assets for rural communities, challenges faced in rural communities, and PSE strategies directed at food security in rural communities. Although the project aimed to identify PSE strategies (third theme), assets (first theme) and challenges (second theme) in rural communities were important to code and report because of the importance that participants placed on these contextual factors. When participants identified PSE strategies, they simultaneously underscored the assets and challenges to consider when adopting and implementing any strategy in rural communities. Each theme is reported with example quotes.

Appreciation for Assets in Rural Communities

During interviews, practitioners and family participants discussed assets of rural communities (**Table 6**). These assets helped to contextualize the emergent list of strategies and activities to ensure family food security in rural places.



Table 6. Assets identified for rural communities during interviews by practitioners and families

Asset	Practitioners (n=30)	Families (n=42)
Connections with local organizations	Underscored importance of building trust through local organizations	Underscored importance of building trust through local organizations
Community needs assessments	Necessary to align program goals with local needs	--
Agricultural landscape	Missed opportunities to grow local food to feed local community	Opportunity to grow local food to feed local community
Close-knit	Community members help each other	Community members help each other
Self-sufficiency	--	Generates pride in the community

Practitioners discussed the importance of establishing connections with organizations already in the rural community as these are trusted by the priority population. Local organizations discussed by practitioner and family participants included churches; higher education systems; cooperative extension; salvation army; 211 (phone number to learn about essential community services); libraries; Young Men’s Christian Association (YMCA); boys and girls clubs; and programs prioritizing children (e.g., afterschool programs, early childcare education, bookmobiles).

“There is a place called [name of organization] which is for the state to listen to the Latinos voices that need to be heard, and for the government to support us more. Sometimes you go there to talk and listen to what other people are saying. A lot of people from the community go and participate to support [name of organization] because it has been helping the community for 15 years now, and it has provided a lot of help for everything.”

— *Georgia family participant speaking Spanish*

Practitioners pointed out that conducting community needs assessments with the priority audience served to align the organization’s goals with the needs of rural community members. Ideally, community needs assessments should be conducted before a program begins and conceptualized with the priority audience in order to engender trust with the priority population.

By prioritizing the needs of people living in rural geographies and including people in community needs assessments, practitioners reported high retention in programming which helped build long-term relationships.

“We do a needs assessment of our community, most every year, and those helped to guide our programming. Whatever the needs are, like chronic disease is a common need across the state. I do a lot of programming with chronic disease prevention, diabetes prevention, diabetes management, cancer prevention, hypertension. Teaching a lot of classes in that respect. Food security is another issue.”

— *Georgia practitioner*

Practitioner and family participants spoke about the agricultural landscape surrounding rural geographies, which helped grow food. There was common understanding that rural communities have the space to grow food which has the potential to support their local community members and economy. Notably, although agricultural assets exist, practitioners mentioned that there were missed opportunities to operate farmer’s markets or use land within the rural communities to grow food for people that lived there.

“We have high agriculture land. We’re considered the winter vegetable capital of the world. If you eat salad between, from October and February, it came from [my town]. We grow everything from lettuce and spinach to artichokes, and watermelons and cantaloupe to anything in between. We literally have acreage fields next to many of our schools and the students and their parents are farmers and harvesters and irrigators and everything else.”

— *Arizona practitioner*

Practitioner and family participants noted that communities in rural geographies felt very close-knit, which fostered a sense of belonging. Being close-knit was also seen as an asset and beneficial during times of stress, as community members often helped each other through stressful times by sharing resources and offering help to reduce barriers for families.

“As far as community wise, being self-sufficient. Rather than having to rely upon the federal government just being self-sufficient [is good]... everybody’s pitching in, it’s more of a communal, like everybody helping out everybody.”

— *Arizona family participant speaking English*

The close-knit nature of rural communities also supported self-sufficiency. Family participants identified that having neighbors help neighbors be self-sufficient generated feelings of pride for their communities.

“[Where I work] it’s a small, close-knit environment, smaller population, everybody knows each other, that there’s strong awareness in those communities.”

— *Arizona practitioner*



Challenges Faced in Rural Communities

Practitioners and family participants experienced challenges both specific to living in a rural area and generalizable to geographies beyond rural locations. The description of challenges helped to contextualize how the emergent list of strategies and activities could ensure family food security in rural places.

Challenges Specific to Rural Areas

Challenges specific to rural areas included: transportation; affordable health care; affordable housing options; internet access; access to affordable and healthy food; employment opportunities; and limited childcare facilities ([Table 7](#)).

Table 7. Challenges identified specific to rural communities during interviews by practitioners and families

Challenge	Practitioners (n=30)	Families (n=42)
Transportation	More time and money needed to access essential needs in rural communities	Limited public transportation
Affordable health care	Missed opportunities for mental health services in rural communities	Distance to travel and long waiting lists for healthcare services
Affordable housing options	Minimal affordable housing options in rural communities with current high living expenses	Minimal affordable housing options in rural communities with current high living expenses
Internet access	Recommendations to consider internet access when working in rural communities	Requested in person offices versus remote opportunities
Access to affordable and healthy food	Observed convenience stores in rural communities with limited nutritious food options	Trade offs between driving a further distance for nutritious and less-expensive food versus shopping at local convenience stores with limited food access
Employment opportunities	--	Fewer employment opportunities and limited wages in rural communities
Limited childcare facilities	--	Limited childcare facilities in rural communities

Practitioners elaborated that rural family participants living in rural communities may spend more time and money for transportation to access food, work, childcare, school, healthcare, and other essential needs compared to families living in more urban areas. Often, public transportation was not an option in rural communities, which limited mobility for rural residents with varied abilities to afford personal transportation.

“Living in a rural area, you don’t have access to transportation. Sometimes families ask for rides to the store, and they may or may not be available at the time that they need it. No excess bus lines.”
 — *Georgia practitioner*

As a result of transportation challenges, access to affordable health care services was frequently mentioned as challenging. Family participants reiterated their struggle traveling long distances to visit a doctor, especially specialists. The healthcare facilities that are in the communities where families lived were often completely booked months in advance. Both practitioners and family participants endorsed the idea that mental health services are missing in rural communities and are much needed.

“Migrants, in particular, it can be a lot of expense to have a medical emergency and not have insurance. There was a time when we had tried to get medical insurance, but it didn’t cover 100%, despite paying a significant amount that I consider to be expensive for medical insurance that doesn’t meet people’s needs.”
 — *Texas family participant speaking Spanish*



In addition to transportation challenges and access hurdles related to those challenges, participants that the lack of affordable housing options, costly home repairs, utility expenses, and multiple families living together creating tight living quarters further prevent them from successfully remaining food secure. Competing financial obligations such as housing costs and utilities limit the amount of money families have for groceries.

“A lot of people that live out here, live off grid because they can't afford the utilities. When they live off grid, there is almost no communication. Or they don't have a way to prepare a hot meal...you have lots of people who literally don't have power, don't have running water, they just have water being brought in in from a water truck.”

— *Arizona family speaking English*

As more services are transitioning to online, practitioners recognize, and family participants experience, internet access as challenging. Practitioners emphasized the need to consider access to the internet when developing programs (e.g., ensuring access to program components with or without internet functionality). Family participants requested having more in-person offices to help with social service applications and limit the need for internet access.

“I've had issues where [the social service] doesn't get any of my documents that I'm sending in. I work with people at the health department who will fax or mail in my documents... and they say they don't get them.”

— *Michigan family participant speaking English*

Family participants frequently indicated limited access to foods. The larger grocery stores were viewed as having more budget-friendly foods compared to smaller grocery stores. One trade-off mentioned was shopping at the local convenience store for food which may offer lower nutritional value foods but provide convenience of being close to their homes compared to traveling further away from home to access more nutritious options at other stores. Some family participants preferred driving further distances to purchase foods in bulk, which was viewed as more budget-friendly. Family participants also mentioned limited access to culturally relevant foods in the communities in which they lived.

“There's Dollar General here we visit more than the grocery store. Because Dollar General is sometimes a little more expensive, but sometimes they're cheaper than the store. Transportation wise and monetarily is where it hurts you, depending on where you're going or what you need.”

— *Texas family participant speaking English*

Family participants acknowledged the challenge of fewer employment opportunities and lower wages in rural communities more frequently than practitioners. Family participants mentioned driving long distances to get to work and felt it was not realistic to live on minimum wage. As explained by family participants, lack of employment opportunities and jobs that paid minimum wage clearly reduced families' income and, thus, their ability to be food secure.

“Around here, there's not a whole lot of jobs to have and what there is, they're making minimum wage, which is like a \$7.25 an hour. You can't, especially with a one parent household, you cannot live off of that amount of money as far as paying rent, paying your utilities, buying food, buying diapers, buying necessities, toilet paper, laundry, soap, bath, soap, all that stuff. You can't afford to do that. So you have to make cut somewhere.”

— *Kentucky family participant speaking English*

The limited options for childcare and early childhood education in rural communities was also mentioned. Family participants mentioned difficulty affording childcare, locating a childcare facility, and limited hours of operation among childcare facilities they do find. Family participants felt that childcare facilities hours of operation conflicted with caregivers' work schedules, which limits their ability to balance work hours and childcare availability, resulting in reduced economic opportunities that would ultimately support food security.

Challenges Not Specific to Rural Areas

Practitioners and family participants acknowledged challenges that go beyond just rural geographies, including communicating about social services in multiple languages; building trust within communities; negative experiences when using social services; limited support for infrastructure like food banks; policy restrictions and confusion; gap in coverage of social services; and time and stress of applying and using social services (**Table 8**).

“We do have early childhood for needy families. The only problem with that is that they're only open, from eight to two, or 7:30 to 1:30. My kid qualifies and he's able to be in that program. But then what am I supposed to do? If my hours are from like, seven to seven? How do I find someone to pick up my child? Or what am I supposed to do the other three, four hours or possibly, like I said, if he worked at 12-hour shifts? What do I do with my kids?”

— Georgia family participant speaking English



Table 8. Challenges identified that were not specific to rural communities during interviews by practitioners and families

Challenge	Practitioners (n=30)	Families (n=42)
Communicating about social services in multiple languages	Attempts in reaching people speaking multiple languages	Feelings of frustration or embarrassment when translation services were unavailable
Building trust within communities	Mistrust with people not living in local community	--
Negative experiences when using social services	--	Experiences with stigma associated when using social services
Limited support for infrastructure like food banks	Limited support for local infrastructures	Infrastructures inability to meet the needs of community members
Policy restrictions and confusion	Frustration with policy restrictions of social services	Do not know where to go or who to talk with to advocate for policy changes
Gap in coverage of social services	Gap in coverage of social services	Gap in coverage of social services and limited emergency resources available
Time and stress of applying and using social services	Stressful and confusing social service applications	Once applied for social services, lengthy time to wait to receive service

The lack of ability to reach populations who speak non-English languages was a frequently mentioned barrier among practitioners. Family participants noted feelings of embarrassment and frustration when trying to use social services and no staff members spoke the same language they did.

“Our migrant farmworkers speak Spanish. If they don't speak any English at all, we don't have a Spanish speaking person in our office. We then have to call a translating service. And then you have to, communicate with a translator on the phone, even if they've been in your office and that kind of is negative ... I think a little embarrassing for the individual like they did seem to help but then we can't help them.”

— *Michigan practitioner*

Practitioners mentioned that mistrust existed between people who live outside of communities attempting to build new programming. A couple of ways practitioners mentioned to build trust in a specific community is to work with a community champion, such as a promotora, and collect input from people who live where the program will take place.

Family participants had negative experiences when applying and participating in social services. For example, some family participants felt looked down upon by the cashier when shopping at the grocery store. Family participants also spoke about the difficulty and frustration of locating eligible food items to purchase, specifically through WIC, as some of the smaller grocery stores do not have all of the items that are approved by programs like WIC. By not being able to fully utilize the social service benefits, families may have competing financial priorities and not be able to provide healthy food.

“Everyone's so judgmental and I have five kids and we might need a little assistance here or there. They say 'well, you shouldn't have had that many kids. You knew that it was going to cost money.' They say 'I have this many kids and I can do this or I can do that.' Then they look down upon you like that person's using the system, this person is using the system. Like I said, everybody's circumstances are different and if I didn't need to use those programs, I wouldn't use those programs because there's other people that need them just as much or more than I do. We've been looked down upon and if you go to the grocery store, you have to have an actual cashier to do that process. The cashiers look at you because we're using WIC.”

— *Kentucky family speaking English*

Practitioners mentioned limited funding and infrastructure to support food distribution sites, while family participants mentioned that food distribution sites provided inadequate foods to overcome the resource gap in the household. Family participants discussed their experiences receiving unappealing or expired food, limited availability of allergen-friendly foods, and minimal culturally relevant options. Some food distribution sites had strict eligibility requirements such as living in a specific zip code to receive food or having a cap on the frequency of distributions. Both practitioners and family participants noted that food distribution sites are essential in communities as they supplement family's foods. With limited availability and, if available, varied access to the amount and types of healthy foods needed, rural families cannot rely on food banks alone to remain food secure.

“Every month there's a food bank. The only thing that I see as a downside of food banks is that the food is often close to expiration. I know they try to use everything, but for example, with meat, because canned foods obviously have a longer shelf life. But with meat and fruits, they're almost expired. For example, the fruit is very ripe, so it doesn't last much longer than maybe two days, and then it's gone.”

— *Texas family participant speaking Spanish*

Practitioners talked about the complexity of navigating policy decisions made at the local, state, and national levels. Examples included not being able to talk with policymakers to ask questions about changes in social services, confusing qualifications (e.g., for program eligibility), differing policies in tribal communities, limited programs for veterans, and minimal support for youth summer feeding programs. Practitioners mentioned that it is essential to elevate the voices of community members when discussing policy, yet family participants did not know where to go or who to talk with to advocate for policy change in their community. Practitioners and family participants described that policies generally influence eligibility guidelines for social services and infrastructure for food systems.

“The summer meal programs could do some work. There's not a lot of places around that offer that, they're kind of limited in the summer, and we always here give much more food in the summer and our kids set programs or to our families, because a lot of times they don't have any food to eat. And if there's not a place too close by, or whatever, then they're not, they're not in school, so they're not getting a free or reduced lunch. So I see that as a big need.”

— *Texas practitioner*

Both practitioners and family participants described concerns about the inflexibility of eligibility guidelines. Some families had slightly higher incomes than program eligibility criteria, and others experienced decreased benefits when earnings increased, also known as the benefits cliff. Suggested solutions were to expand eligibility for social services, build a buffer time period for families who newly exceed eligibility thresholds to receive benefits, and ensure the amount provided through programs meets the growing prices of goods. Eligibility restrictions prevented coverage for undocumented family participants.

“The one for food stamps could be improved, because they only count children who are citizens and do not count children who are not citizens. It is true that they should be a little more open in that regard because, well, the children are not to blame, right, but sometimes they clearly need more, to be counted, because they are also part of the family.”

— *Texas family participant speaking Spanish*

Practitioners perceived the application and waiting time for social services as stressful and confusing for applicants, while family participants expanded on lived experiences. Each social service application includes multiple pages with numerous confusing questions. Family participants shared frustrations with completing the application process and not having any follow-up from program staff. Once applications were submitted, family participants continued to have a gap in income as the approval process was lengthy.

“For our SNAP, they've turned all that into where you used to be to go in and sit down with the caseworker. Provide your information, they will work with each case right there. It's not like that anymore and is over the phone. They don't do face to face visits anymore. And that for some people was hard. I noticed that a face with a name is so much better for me. And I feel more comfortable, like sharing my experiences and my information with somebody that I can actually see versus someone that I don't know and it's over the phone.”

— *Kentucky family speaking English*



Policy, Systems, and Environmental Strategies Directed at Food Resources in Rural Communities

Practitioner and family participants discussed existing policy, systems, and environmental strategies in the communities lived in or served that directly improved food resources in rural communities. Suggestions for new or modified strategies were also discussed.

Practitioners and family participants discussed **policy-level** strategies in rural communities that focused on changes to federal social services. These federal social services direct food resources or expand household financial resources to pay for food. Nutrition specific social services mentioned included SNAP; WIC; school nutrition programs. Other social supports specific social services mentioned included healthcare programs like Medicaid, SCHIP, social security; housing assistance like LIHEAP; unemployment; early childhood education; stimulus checks; tax credits; TANF; SSDI; SSI. Ideas shared to improve social services overall were to streamline application and qualification processes (e.g., one application for multiple programs), increase the amount of benefits to meet the inflation of goods, increase advertisements through local and social media outlets, implement a referral process to navigate questions and concerns, employ community health workers to reach families and assist with enrollment, and ensure that program rules reduce difficulty of utilizing benefits (e.g., offering phone, video, or computer for appointments).

“I’d love to see policies that streamline the application process for all of this, I’d love to see a policy push that would streamline it, modernize the application process, and where it becomes just a one stop shop where folks don’t have to go to a million different places to qualify for different things.”

— *Arizona practitioner*

Among practitioners and family participants, SNAP and WIC were viewed as beneficial to aid with the cost of food. Some family participants specifically appreciated being able to select foods at the grocery store using SNAP, while other family participants preferred the WIC food package that focused on nutritious foods. With the WIC food packages, family participants mentioned having a difficult time locating specific items in rural grocery stores. Since WIC reaches high-risk families, practitioner and family participants shared that incorporating nutrition education during recertification visits was viewed as beneficial as families receive tailored information appropriate for the child’s stage of development. Family participants specifically suggested adding more accountability for SNAP and WIC to ensure the funds are being utilized for appropriate foods.

“[We’ve used] WIC and that was really helpful and pretty easy to do. It was easy to apply and easy to keep up with because during the [recertification] call [during COVID] it was pretty much phone interviews, just checking in.”

— *Arizona family participant speaking English*

Family participants valued school meal programs as they provided one to three meals per day during the school year. Practitioners and family participants appreciated that all school lunches were free during the COVID-19 pandemic and suggested continuing the approach to alleviate stigma and ensure all students have equal access to a meal even with overdue balances. Practitioners and a few family participants said schools provided students with food outside of the traditional school day, such as backpack programs for caregivers to procure food while picking up students—foods provided to students to fill the gap when not in school such as weekends or evenings. Family participants and practitioners suggested expanding summer feeding programs and non-congregate meal sites.

In some schools, nutrition education was incorporated throughout mealtime and in the classrooms. Some practitioners emphasized the importance of incorporating culturally relevant meals within the school lunch program.

“The [name of backpack program] is a program that provides food bags for children in the highest needs category that are identified in every school district in our county, the [backpacks] meet all the food categories, also, the nutrition categories, and then also, they're, they're provided during the times that they are not in school. So it's every holiday break. They're provided enough food to sustain them during that holiday break.”

— *Michigan practitioner*

System-level strategies focused on the purpose, function, and connections that were developed in rural geographies. Practitioners highlighted the importance of building trust with community members within systems that are designed to support food resources. Concrete examples included hiring bilingual staff members and starting resource centers. Bilingual staff members helped families to feel like systems were built for their needs, including staff that can speak about resources in a language that an individual understands. Resource centers provided centralized locations to create connections with nutrition and other relevant resources that support food security.

“We started a resource center, and a food pantry in [the town I work in], because 51% of our population at that school is Hispanic. After we got the kids hunger grant, we were able to secure enough money to hire a bilingual employee to work there. During the week, [the bilingual staff member] works 10 to 12 hours a week and we have the center open on Wednesday and Thursday nights from five to seven. On Saturdays from 12 to two and Sunday three to five. So families that work and still need help and it's convenient for the ones that are off work.”

— *Kentucky practitioner*

Family participants valued school systems that were designed around their logistical needs. For example, afterschool programs provided food resources to children and enabled caregivers to have a traditional work schedule which is helpful with economic stability within the family.

Similarly, family participants perceived early childhood education centers as helpful when they provide access to foods, a reliable place to be during the day, and support traditional work hours.

“My child goes to a program called [name of youth program]. After school, they have [youth] for about 3 hours, from 3:30 to 6:00, they teach them to read, they teach them to do their homework. This program is important because once or twice a month they meet with the parents and the children also go and they teach them how to brush their teeth, they educate them, they teach them to read if they have reading problems. If the child has problems in school, they help them.”

— *Georgia family speaking Spanish*

Practitioners perceived that providing nutrition education (both online and in-person) was a beneficial component of systems to support food security in rural areas. Implementing an evidence-based curriculum including cooking skills and budgeting was important among those providing education. Some practitioners mentioned providing education which was specific to preventing or managing chronic diseases. Family participants suggested offering future education around budgeting.

“We do a lot of food preservation and food safety programming. We're doing a lot of canning classes and canning programming and then we house the National Center for Home Food Preservation here at UGA. We answer a lot of questions and do a lot of programming in that work.”

— *Georgia practitioner*

Environmental-level strategies focused on how food is accessed in the physical environment. Growing or purchasing locally-grown foods in farmer's markets or community gardens were discussed. Practitioners talked about farmer's market programs, such as Double Up Food Bucks, where the dollar amount is doubled for people to purchase foods (e.g., fruits and vegetables) from local vendors.



Additionally, family participants mentioned that procuring food through food as medicine programming was an important avenue to access healthy food in rural communities.

“A lot of programs throughout the state are starting to invest in some of these community gardens, spaces and offer the guidance and time for managing the garden. And also harvesting vegetables and helping get those shared out in the community. So hopefully, we're going to work on that soon.”

— *Georgia practitioner*

Food distribution sites were viewed as an important part of the environment to support food security in rural areas. Practitioners perceived food distribution as helpful, and family participants explored their experiences visiting the sites. Churches were oftentimes mentioned as coordinating assembly and/or distribution of pre-packaged boxes of food. Family and practitioner participants had concrete suggestions for improving the system around food distribution, included starting mobile food pantries, expanding hours of operation, and relaxing eligibility criteria.

“A lot started doing mobile markets or mobile distributions, where they will actually take food into a community. Kind of like a grocery store on wheels, so it has fresh and frozen food, that people can actually go into the vehicle and pick out what they need for their family.”

— *Texas practitioner*

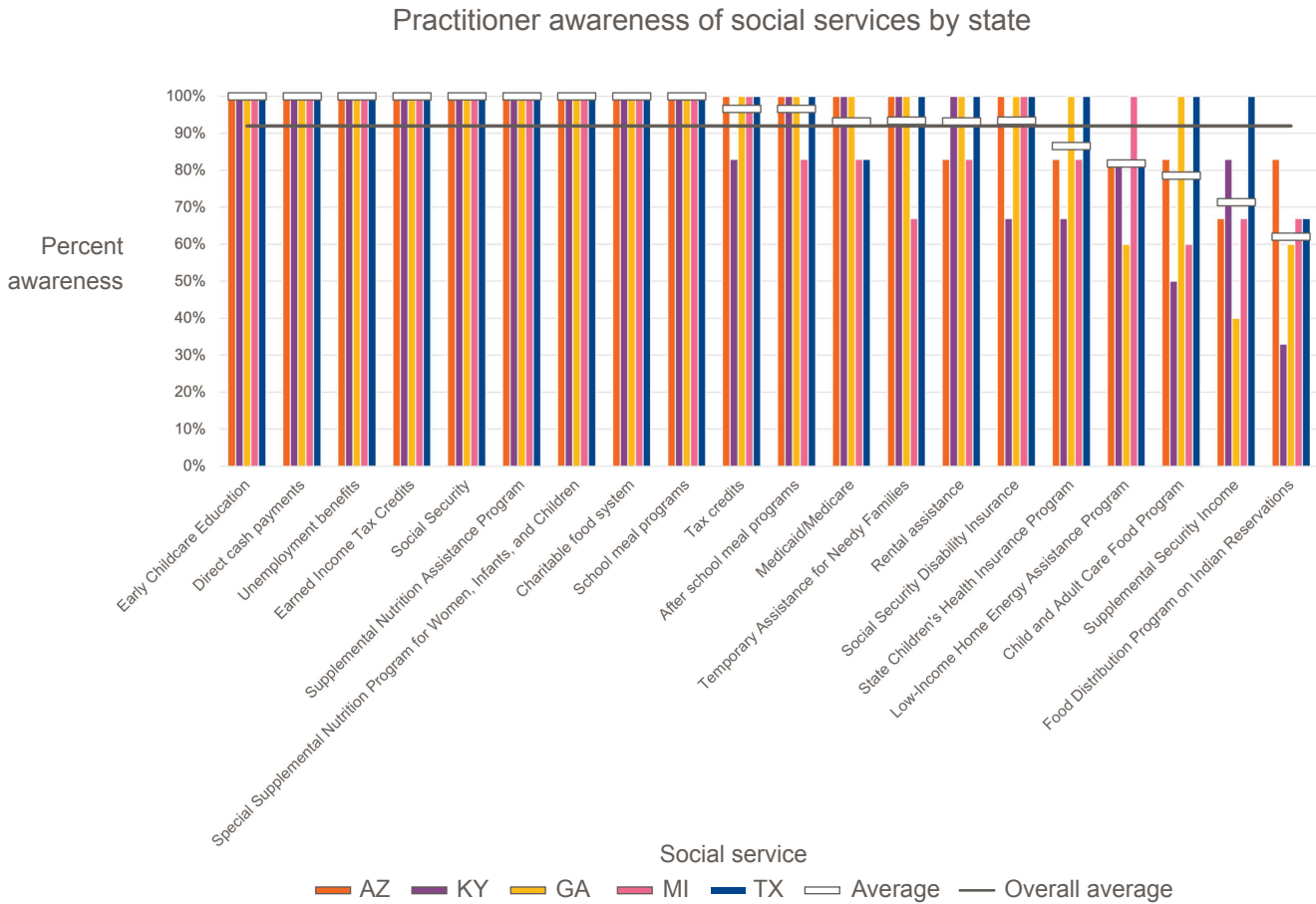
Practitioner Social Service Awareness

During the interviews, practitioners and family participants were asked whether they are aware of social service programs. This was important to measure because social services were seen as a source of support for family food security in rural places. **Figure 2** shows the percentage of practitioners who were aware of each social service by state. Overall, all practitioners were aware of early childcare education, direct cash payments, unemployment benefits, EITC, Social Security, SNAP, WIC, charitable food systems, and school meal programs.

Practitioners working in Texas had the highest overall awareness of social services (97%), followed by Arizona (94%), Georgia (93%), Michigan (90%), and Kentucky (88%). Notably, the question asked during interviews was about general awareness of the program and does not reflect if these services are available in the interviewee's community.



Figure 2. Practitioners' serving rural geographic areas awareness of social services by state



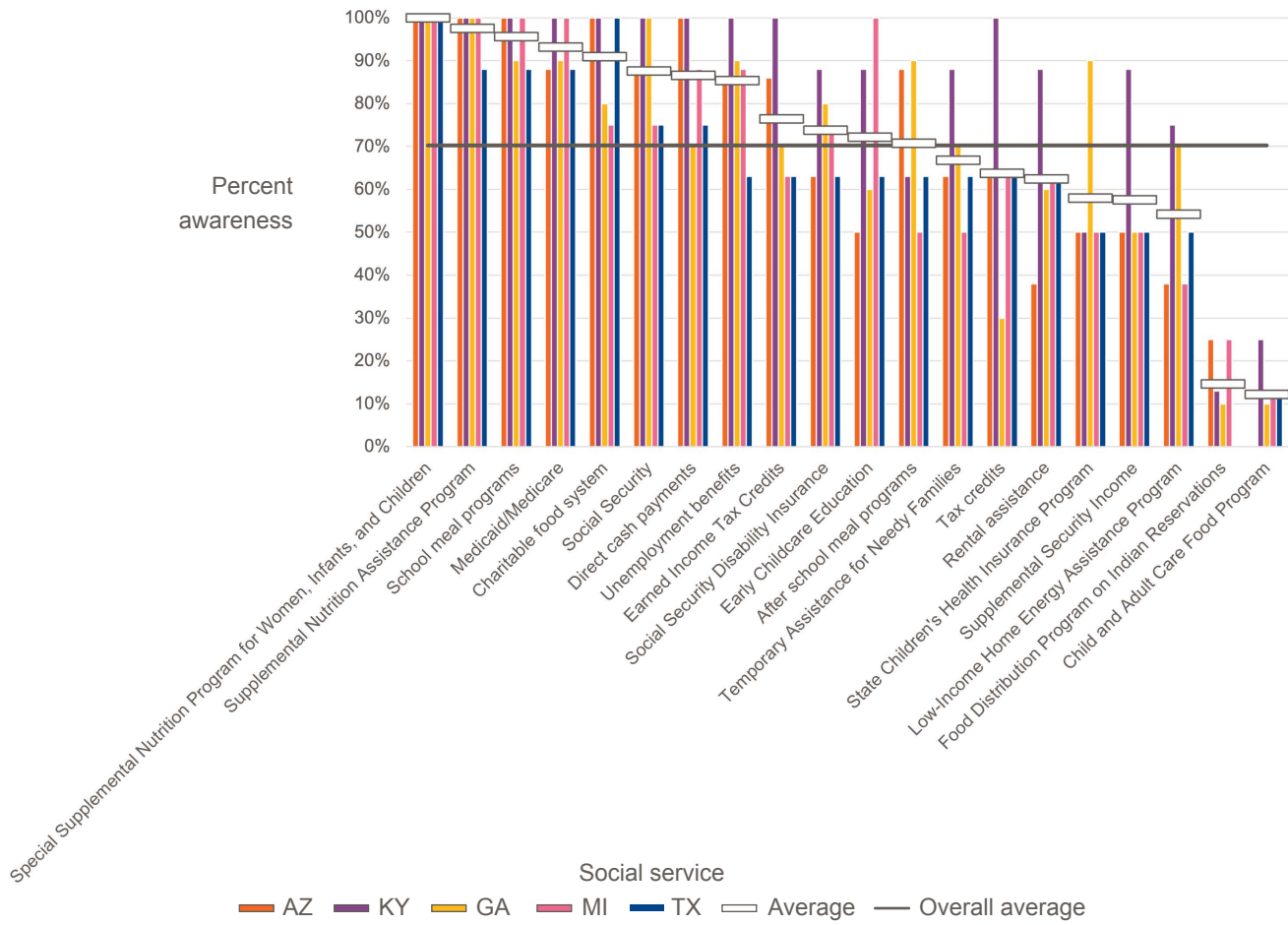
Family Participant Social Service Awareness

Figure 3 shows the percentage of family participants who were aware of each social service by state for those who answered each question. Overall, family participants were aware of WIC (100%), SNAP (98%), school meal programs (96%), Medicaid (93%), food pantries (91%), social security (88%), direct cash payments (87%), unemployment benefits (85%), WIC (85%), EITC (76%), SSDI (74%),

early childcare education (72%), after school meal programs (71%), TANF (67%), tax credits (64%), rental assistance (64%), SCHIP (58%), SSI (58%), LIHEAP (52%), FDPIR (15%), and CACFP (12%). Family participants living in Kentucky had the highest overall awareness of social services (83%), followed by Georgia (71%), Arizona (69%), Michigan (68%), and Texas (64%).

Figure 3. Rural family participant awareness of social services by state

Family participant awareness of social services by state



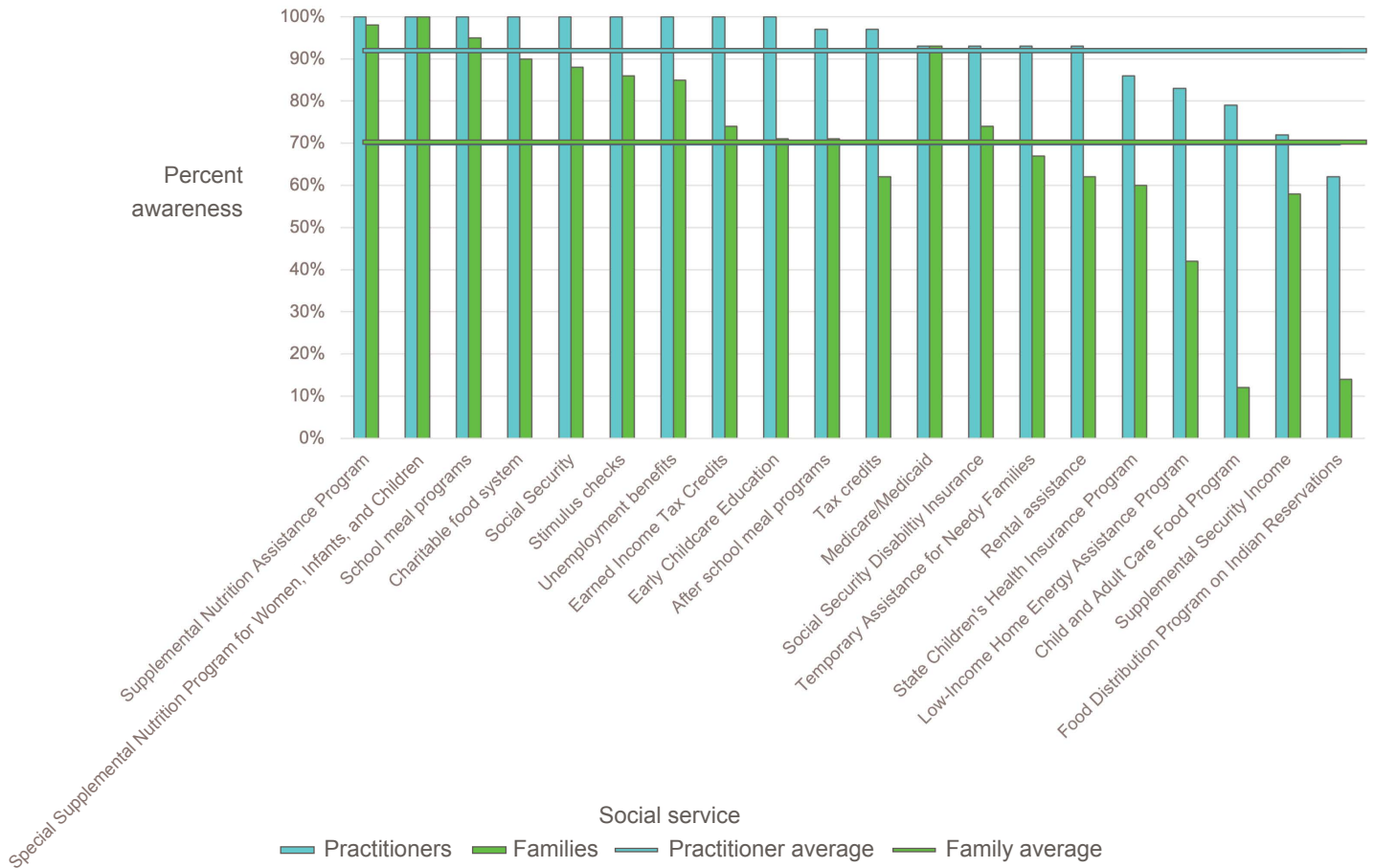
Overall Practitioner and Family Participant Social Service Awareness

Figure 4 shows the combined percentage of practitioners and family participants who were aware of each social service across states. To summarize, practitioners and family participants both had a high awareness of programs such as SNAP, WIC, general school meal programs, and charitable food system programs. Gaps in program awareness among practitioners and family were seen in the CACFP, FDPIR, and LIHEAP, where practitioners had a much higher level of awareness of these programs in comparison to family participants. Notably, there was low awareness for the FDPIR as this is for specific populations and not available in all communities. There was also low awareness among family participants about the CACFP, which is a program for care sites where family participants may receive food, although they may not realize.

- SNAP awareness among practitioners was 100% and family participants was 98%.
- WIC awareness among practitioners was 100% and family participants was 98%.
- School meal programs awareness among practitioners was 100% and family participants was 95%.
- Charitable food systems awareness among practitioners was 100% and family participants was 90%.
- Social security awareness among practitioners was 100% and family participants was 88%.
- Direct cash payments awareness among practitioners was 100% and family participants was 86%.
- Unemployment benefit awareness among practitioners was 100% and family participants was 85%.
- EITC awareness among practitioners was 100% and family participants was 74%.
- Early childhood education awareness among practitioners was 100% and family participants was 71%.
- After school meal program awareness among practitioners was 97% and family participants was 71%.
- Tax credit awareness among practitioners was 97% and family participants was 62%.
- Medicaid/Medicare awareness among practitioners was 93% and family participants was 93%.
- SSDI awareness among practitioners was 93% and family participants was 74%.
- TANF awareness among practitioners was 93% and family participants was 67%.
- Rental assistance awareness among practitioners was 93% and family participants was 62%.
- SCHIP awareness among practitioners was 87% and family participants was 60%.
- LIHEAP awareness among practitioners was 82% and family participants was 42%.
- CACFP awareness among practitioners was 79% and family participants was 12%.
- SSI awareness among practitioners was 71% and family participants was 58%.
- FDPIR awareness among practitioners was 62% and family participants was 14%.



Figure 4. Overall social service awareness among practitioners and family participants in rural geographic area



Development of Policy, Systems, and Environmental Strategies and Activities

The research team reviewed all interview data and listed PSE strategies and associated activities to accomplish PSE strategies. The list was presented to SOS staff to elicit feedback on the strategies and activities. Together, SOS and GSCN staff modified the list and worded the strategies in an understandable way. The following list includes the 13 PSE strategies and activities which were presented in the Delphi portion of the study. Supporting quotes for each of the 13 PSE strategies and activities are shown in [Appendix D](#).

- Make people **more aware** of programs
 - o Advertising for these programs in creative ways such as through social media
 - o Advertising these programs in many locations in the community
 - o Local community members sharing how to sign up and use these programs
 - o Organizations employing bilingual staff members to tell people about programs
- Make it **easier to sign up** for programs
 - o Making sure there are local offices in rural communities where people can go to sign up for these programs
 - o Make program applications shorter
 - o Allow people to fill out one application that can be used for all of these programs

- Make it **trouble free for people to use programs**
 - Make it faster to start using these programs
 - Change program rules for how people can use money or services
 - Allow people to receive program services on the phone, video, or computer
 - Make it easier to check out at grocery stores when using SNAP and WIC
 - Make it easier to keep using and stay on these programs
 - Make it easier for immigrants to use these programs
 - Follow-up with families that are receiving programs
 - Continue programs during transitions of income changes
- Provide **chances for people to suggest changes** to programs
 - Offer ways for people to share their ideas for changes to policies
 - Advocate for an increase in the amount of money that programs can give people
 - Create more programs that help families after WIC ends when kids turn 6 years old
- **Expand food banks**
 - Open food banks for more hours
 - Let people choose the foods they get at the food bank
 - Provide more foods that give people from various cultures a “taste of home”
 - Provide more foods that are good for food allergies or special diets like low sodium
 - Increase funding for food banks
 - Create food banks inside existing community spaces like churches, schools, health care clinics
 - Build food banks in places that are easier to get to
 - Provide more foods that are appealing
- **Expand school nutrition programs**
 - Serve more food during meals at school
 - Provide free school lunch for all students
 - Provide more places for school-age children to get meals
 - Provide more school foods that give people from various cultures a “taste of home”
 - Give leftover foods to students or food banks
 - Make nutrition standards easier
 - Create more summer free-food programs for school-age children
 - Provide after school programs
 - Provide more school supply drives
 - Create more backpack programs that send kids home with food
 - Teach nutrition and food skills to students at school
- Provide more places to **get food locally**
 - Start community gardens
 - Let people donate meat from hunting to food banks
 - Provide discounts at farmer’s markets
 - Make the food at farmer’s markets less expensive
 - Create mobile farmer’s markets
 - Provide prescriptions for fruits and vegetables at health care clinics
 - Work with food banks to offer fresh local foods
- Provide options for people to **learn about buying and making healthy foods** on a budget
 - Provide classes and resources in multiple languages
 - Provide food skills classes online (website, Facebook, Instagram, YouTube)
 - Provide cooking and finance classes (budgeting, saving)
 - Provide food preservation classes (canning foods, freezing foods)
 - Provide food safety classes
- Make **childcare options and early childhood education** better fit the needs of families with a low income

- o Provide bookmobiles and mobile libraries
- o Provide free preschool
- o Open more childcare locations
- o Open childcare facilities for more hours
- Expand employment
 - o Increase the minimum wage
 - o Create more job opportunities
 - o Provide people with more help when searching and applying for a job
- Increase access to **affordable health care**
 - o Provide more health care options that cost less
 - o Provide mobile medical vans
 - o Provide more options for affordable mental health services
- Make **housing more affordable**
 - o Provide help for paying for gas, electric, water, and other utilities
 - o Create limits on how much a family must pay for gas, electric, water, and other utilities
 - o Build more places to live that cost less
- Make it easier to **get from place to place**
 - o Lower gas prices
 - o Provide free public transportation

Some strategies were related to nutrition: *make people more aware of programs, make it easier to sign up for programs, make it trouble free for people to use programs, provide chances for people to suggest changes to programs, expand food banks, expand school nutrition programs, provide more places to get food locally, and provide options for people to learn about buying and making healthy foods on a budget. Other social service strategies were also identified: make childcare options and early childhood education better fit the needs of families with a low income, expand employment, increase access to affordable health care, making housing more affordable, and make it easier to get from place to place.*

Delphi Panel Results

Delphi Panel Participant Characteristics

Overall, eight SOS staff, 12 practitioners, and 18 family participants speaking English, and eight family participants speaking Spanish continued to participate in the study through the Delphi survey. Following, seven SOS staff, five practitioners, and seven family participants speaking English, and three family participants speaking Spanish participated in the Delphi focus group. Participant demographics by participant group are shown in **Table 9**.

The SOS staff had an average age of 37 years, and identified as White (75%), Black or African American (13%), and Hispanic (13%). All of the SOS participants had a college education, bachelor's degree (25%) and master's degree or above (75%). All of the SOS participants reported high food security.

Two to three practitioners from each state completed the survey, followed by one practitioner per state participating in the focus group. Practitioners participating in the survey identified as White (83%), Black or African American (8%), and more than one race (8%). Practitioners had some college with no degree (17%), associate degree (8%), bachelor's degree (33%), and master's degree or above (42%). Practitioners self-reported food security status as high (67%), marginal (8%), low (17%), and very low (8%). Practitioners were employed at community family resource areas (33%), school nutrition (33%), food banks (17%), Department of Health (8%), and Extension (8%).

A total of 18 family participants speaking English completed the Delphi survey, eight were completed in Spanish. There were seven participants in the focus group with family participants speaking English and three participants in the focus group with family participants speaking Spanish. Family participants completing the survey were from Arizona (31%), Georgia (27%), Texas (19%), Kentucky (12%), and Michigan (12%). Participants identified as Hispanic (50%), White (27%), Black and African American (12%), more than one race (8%), and American Indian (4%). Family participant education included less than high school (31%), high school degree (15%), some college with no degree (35%), associate degree (8%), and bachelor's degree (12%). Family participants self-reported food security as high (15%), marginal (15%), low (27%), and very low (42%).

Table 9. Participant characteristics for the Delphi Panel

Demographic characteristic	SOS participants in the Delphi survey n (%) (Total n=8)	SOS participants in the Delphi focus group n (%) (Total n=7)	Practitioner participants in the Delphi survey n (%) (Total n=12)	Practitioner participants in the Delphi focus group n (%) (Total n=5)	Family participants in the Delphi survey n (%) (Total n=26)	Family participants in the Delphi focus group n (%) (Total n=10)
State						
Arizona			2 (17%)	1 (20%)	8 (31%)	3 (30%)
Georgia			2 (17%)	1 (20%)	7 (27%)	2 (20%)
Kentucky			3 (25%)	1 (20%)	3 (12%)	1 (10%)
Michigan			3 (25%)	1 (20%)	3 (12%)	1 (10%)
Texas			2 (17%)	1 (20%)	5 (19%)	3 (30%)
Age	37 years	37 years	47 years	46 years	38 years	38 years
Race and Ethnicity						
American Indian	0 (0%)	0 (0%)	0 (0%)	0 (0%)	1 (4%)	0 (0%)
Black or African American	1 (13%)	1 (14%)	1 (8%)	0 (0%)	3 (12%)	2 (20%)
Hispanic	1 (13%)	1 (14%)	0 (0%)	0 (0%)	13 (50%)	4 (40%)
More than one race	0 (0%)	0 (0%)	1 (8%)	1 (20%)	2 (8%)	1 (10%)
White	6 (75%)	5 (71%)	10 (83%)	4 (80%)	7 (27%)	3 (30%)
Education						
Less than high school	0 (0%)	0 (0%)	0 (0%)	0 (0%)	8 (31%)	2 (20%)
High school degree	0 (0%)	0 (0%)	0 (0%)	0 (0%)	4 (15%)	3 (30%)
Some college, no degree	0 (0%)	0 (0%)	2 (17%)	2 (40%)	9 (35%)	2 (20%)
Associate's degree	0 (0%)	0 (0%)	1 (8%)	0 (0%)	2 (8%)	1 (10%)
Bachelor's degree	2 (25%)	2 (29%)	4 (33%)	2 (40%)	3 (12%)	2 (20%)
Master's degree or above	6 (75%)	5 (71%)	5 (42%)	1 (20%)	0 (0%)	0 (0%)
USDA food security module ⁴²						
High food security	8 (100%)	7 (100%)	8 (67%)	1 (20%)	4 (15%)	1 (10%)
Marginal food security	0 (0%)	0 (0%)	1 (8%)	1 (20%)	4 (15%)	1 (10%)
Low food security	0 (0%)	0 (0%)	2 (17%)	2 (40%)	7 (27%)	1 (10%)
Very low food security	0 (0%)	0 (0%)	1 (8%)	1 (20%)	11 (42%)	7 (70%)
Area of employment						
Community family resource			4 (33%)	1 (20%)		
School nutrition			4 (33%)	2 (40%)		
Food bank			2 (17%)	1 (20%)		
Department of health			1 (8%)	0 (0%)		
Extension			1 (8%)	1 (20%)		

Delphi Survey Results

The Delphi survey results are reported by individual and overall acceptability, appropriateness, and feasibility. **Appendix G** shows tables representing the scores of acceptability, appropriateness, and feasibility by participant group. The following details the level of support by acceptability, appropriateness, and feasibility within each participant group.

Acceptability

The **acceptability** (the likability of the strategy for your community) score for each PSE strategy by participant group is shown in **Table 10**.

All participant groups scored *make it easier to sign up for programs* very highly acceptable. Five strategies scored very high acceptability among family participants speaking English and family participants speaking Spanish: *make child care and early childhood better fit needs, expand employment, increase access to affordable health care, make housing more affordable, and make it easier to get from place to place*. Generally, both family groups also scored more strategies as very highly acceptable compared to practitioners. For example, among English and Spanish speaking family participants respectively, nine strategies had very high acceptability whereas the practitioners only scored two strategies as very high acceptable. One of the most notable differences was that practitioners found *making housing more affordable* only moderately acceptable compared to families and SOS staff and all family participants who found it very highly acceptable. See list below for detailed acceptability scores.

- Acceptability of *make it easier to sign up for programs*: scored very high among all participant groups.
- Acceptability of *expand employment*: scored very high among family participants speaking English, Spanish, and SOS staff, and high among practitioners.
- Acceptability of *increase access to affordable health care*: scored very high among family participants speaking English, Spanish, and SOS staff and high among practitioners.
- Acceptability of *make housing more affordable*: scored very high among family participants speaking English, Spanish, and SOS staff and moderate among practitioners.
- Acceptability of *make people more aware of services*: scored very high among family participants speaking English and practitioners, and high among family participants speaking Spanish and SOS staff.
- Acceptability of *make childcare options and early childhood education better fit the needs of family participants*: scored very high among family participants speaking English and Spanish and high among practitioners and SOS staff.
- Acceptability of *make it easier to get from place to place*: scored very high among family participants speaking English, Spanish, and high among practitioners SOS staff.
- Acceptability of *make it trouble free for people to use programs*: scored very high among family participants speaking Spanish and SOS staff and high among family participants speaking English and practitioners.
- Acceptability of *expand school nutrition programs*: scored very high among SOS staff and high for family participants speaking English, Spanish, and practitioners.
- Acceptability of *provide chances for people to suggest changes to programs*: scored high among all participant groups.
- Acceptability of *expand food banks*: scored high among family participants speaking English, Spanish, and practitioners and moderate among SOS staff.
- Acceptability of *provide more places to get food locally*: scored high among family participants speaking English, Spanish, and practitioners and moderate among SOS staff.
- Acceptability of *provide options for people to learn about buying and making healthy foods on a budget*: scored very high among family participants speaking Spanish, high among family participants speaking English and practitioners, and low among SOS staff.

Table 10. Support for acceptability* of 13 PSE strategies by participant group^{‡§}

Policy, systems, and environmental strategies [†]	Rural family participants speaking English	Rural family participants speaking Spanish	Practitioners serving rural areas	SOS staff
Make it easier to sign up for programs	Very high support	Very high support	Very high support	Very high support
Expand employment	Very high support	Very high support	High support	Very high support
Increase access to affordable health care	Very high support	Very high support	High support	Very high support
Make housing more affordable	Very high support	Very high support	Moderate support	Very high support
Make people more aware of services	Very high support	High support	Very high support	High support
Make childcare options and early childhood education better fit the needs of families	Very high support	Very high support	High support	High support
Make it easier to get from place to place	Very high support	Very high support	High support	High support
Make it trouble free for people to use programs	High support	Very high support	High support	Very high support
Expand school nutrition programs	High support	High support	High support	Very high support
Provide chances for people to suggest changes to programs	High support	High support	High support	High support
Expand food banks	High support	High support	High support	Moderate support
Provide more places to get food locally	High support	High support	High support	Moderate support
Provide options for people to learn about buying and making healthy foods on a budget	High support	Very high support	High support	Low support



*Acceptability was defined as the likability of the strategy for your community.

† The 13 policy, systems, and environmental strategies were generated during interviews with 30 practitioners and 42 family participants of rural areas in Arizona, Georgia, Kentucky, Michigan, and Texas.

‡ A subset of interview participants and SOS staff participated in the Delphi Panel (survey then focus group) to indicate their level of support for prioritizing strategies. These included 18 rural family participants speaking English, eight rural family participants speaking Spanish, 12 practitioners serving rural areas, and eight SOS staff.

§ The color of each box is associated with results from the Delphi Panel surveys. Colors indicate the weighted score for overall acceptability, appropriateness, and feasibility of a strategy.

Appropriateness

The **appropriateness** (whether the strategy is a good match for the community) score for each PSE strategy by participant group is shown in **Table 11**.

All participant groups scored *make it easier to sign up for programs* very highly appropriate. One strategy, *make it easier to get from place to place* was very highly appropriate among family participants speaking English and Spanish. Family participants speaking Spanish scored *make people more aware of services* as moderately appropriate, while family participants speaking English scored it highly appropriate. SOS staff scored two strategies, *expand food banks* and *provide options for people to learn about buying and making healthy foods on a budget*, as low appropriateness. See list below for detailed appropriateness scores.

- Appropriateness of *make it easier to sign up for programs*: scored very high among all participant groups.
- Appropriateness of *make it trouble free for people to use programs*: scored very high among family participants speaking Spanish and SOS staff and high among family participants speaking English and practitioners.
- Appropriateness of *make it easier to get from place to place*: scored very high among families speaking English and Spanish and high among practitioners and SOS staff.
- Appropriateness of *provide chances for people to suggest changes to programs*: scored high among family participants speaking English, Spanish, and practitioners and moderate among SOS staff.
- Appropriateness of *expand school nutrition programs*: scored very high among SOS staff, high among family participants speaking English and practitioners, and moderate among family participants speaking Spanish.
- Appropriateness of *provide more places to get food locally*: scored very high among family participants speaking Spanish, high among family participants speaking English and practitioners, and moderate among SOS staff.
- Appropriateness of *make people more aware of services*: scored very high among family participants speaking English, high among practitioners, and moderate among family participants speaking Spanish and SOS staff.
- Appropriateness of *make childcare options and early childhood education better fit the needs of family participants*: scored high among family participants speaking English, Spanish, and practitioners, and moderate among SOS staff.
- Appropriateness of *increase access to affordable health care*: scored high among family participants speaking English, Spanish, and SOS staff and moderate among practitioners.
- Appropriateness of *make housing more affordable*: scored high among family participants speaking English, Spanish, and SOS staff and moderate among practitioners.
- Appropriateness of *expand food banks*: scored very high among family participants speaking Spanish, high among family participants speaking English and practitioners, and low among SOS staff.
- Appropriateness of *expand employment*: scored very high among family participants speaking English, high among family participants speaking Spanish and SOS staff, and low among practitioners.
- Appropriateness of *provide options for people to learn about buying and making healthy foods on a budget*: scored high among family participants speaking English and Spanish, moderate among practitioners, and low among SOS staff.



Table 11. Support for appropriateness* of 13 PSE strategies by participant group^{‡§}

Policy, systems, and environmental strategies[†]	Rural family participants speaking English	Rural family participants speaking Spanish	Practitioners serving rural areas	SOS staff
Make it easier to sign up for programs	High support	High support	High support	High support
Make it trouble free for people to use programs	Moderate support	High support	Moderate support	High support
Make it easier to get from place to place	High support	High support	Moderate support	Moderate support
Provide chances for people to suggest changes to programs	Moderate support	Moderate support	Moderate support	Moderate support
Expand school nutrition programs	Moderate support	Moderate support	Moderate support	High support
Provide more places to get food locally	Moderate support	High support	Moderate support	Moderate support
Make people more aware of services	High support	Moderate support	Moderate support	Moderate support
Make childcare options and early childhood education better fit the needs of families	Moderate support	Moderate support	Moderate support	Moderate support
Increase access to affordable health care	Moderate support	Moderate support	Moderate support	High support
Make housing more affordable	Moderate support	Moderate support	Moderate support	High support
Expand food banks	Moderate support	High support	Moderate support	Low support
Expand employment	High support	Moderate support	Low support	High support
Provide options for people to learn about buying and making healthy foods on a budget	Moderate support	Moderate support	Moderate support	Low support



*Appropriateness was defined as whether the strategy is a good match for the community.
 † The 13 policy, systems, and environmental strategies were generated during interviews with 30 practitioners and 42 family participants of rural areas in Arizona, Georgia, Kentucky, Michigan, and Texas.
 ‡ A subset of interview participants and SOS staff participated in the Delphi Panel (survey then focus group) to indicate their level of support for prioritizing strategies. These included 18 rural family participants speaking English, eight rural family participants speaking Spanish, 12 practitioners serving rural areas, and eight SOS staff.
 § The color of each box is associated with results from the Delphi Panel surveys. Colors indicate the weighted score for overall acceptability, appropriateness, and feasibility of a strategy.

Feasibility

The **feasibility** (how possible is the strategy in the community) score for each PSE strategy by participant group is shown in **Table 12**.

Make people more aware of services was scored as a very highly feasible strategy. Yet, *make it easier to sign up for programs* was still scored very highly or highly feasible by participant groups. There were greater differences between practitioners and family participants in their feasibility scores compared to their scores of acceptability and appropriateness. Practitioners tended to score most strategies lower on feasibility than family participants. For example, there were 10 strategies practitioners scored as moderately feasible whereas family participants rated those strategies as highly or very highly feasible. There was a similar trend where SOS staff scored strategies lower on feasibility than family participants. SOS Staff were the only participant group that scored any strategy as low feasibility. SOS staff scored four strategies as low feasibility: *expand food banks*, *provide options for people to learn about making healthy food on a budget*, *increase access to affordable health care*, and *make it easier to get from place to place*. See list below for detailed feasibility scores.

- Feasibility of *make people more aware of services*: scored very high among all participant groups.
- Feasibility of *make it easier to sign up for programs*: scored very high among practitioners, families speaking English, and Spanish, and high among SOS staff.
- Feasibility of *expand food banks*: scored very high among family participants speaking Spanish, high among family participants speaking English and practitioners, and low among SOS staff.
- Feasibility for *make it trouble free for people to use programs*: scored very high among family participants speaking Spanish, high among family participants speaking English, and moderate among practitioners and SOS staff.
- Feasibility of *provide chances for people to suggest changes to programs*: scored very high among family participants speaking English, high among family participants speaking Spanish, and moderate among practitioners and SOS staff.

- Feasibility of *provide more places to get food locally*: scored very high among family participants speaking Spanish, high among family participants speaking English, and moderate among practitioners and SOS staff.
- Feasibility of *make housing more affordable*: scored very high among family participants speaking Spanish, high among family participants speaking English, and moderate among practitioners and SOS staff.
- Feasibility of *make it easier to get from place to place*: scored very high among family participants speaking Spanish, high among family participants speaking English, moderate among practitioners, and low among SOS staff.
- Feasibility of *expand school nutrition programs*: scored high among SOS staff, family participants speaking English, and Spanish and moderate among practitioners.
- Feasibility of *provide options for people to learn about buying and making healthy foods on a budget*: scored very high among family participants speaking Spanish, high among family participants speaking English, moderate among practitioners, and low among SOS staff.
- Feasibility of *make childcare options and early childhood education better fit the needs of family participants*: scored high among family participants speaking English, Spanish, and moderate among practitioners and SOS staff.
- Feasibility of *expand employment*: scored high among family participants speaking English, Spanish and moderate among practitioners and SOS staff.
- Feasibility of *increase access to affordable health care*: scored high among family participants speaking Spanish, moderate among family participants speaking English and practitioners, and low among SOS staff.

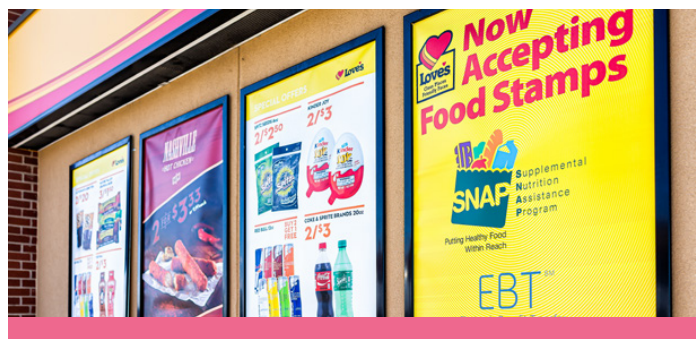


Table 12. Support for feasibility* of 13 PSE strategies by participant group^{‡§}

Policy, systems, and environmental strategies [†]	Rural family participants speaking English	Rural family participants speaking Spanish	Practitioners serving rural areas	SOS staff
Make people more aware of services	Very high support	Very high support	Very high support	Very high support
Make it easier to sign up for programs	Very high support	Very high support	Very high support	High support
Expand food banks	Moderate support	Very high support	Moderate support	Low support
Make it trouble free for people to use programs	Moderate support	Very high support	Moderate support	Moderate support
Provide chances for people to suggest changes to programs	Very high support	Moderate support	Moderate support	Moderate support
Provide more places to get food locally	Moderate support	Very high support	Moderate support	Moderate support
Make housing more affordable	Moderate support	Very high support	Moderate support	Moderate support
Make it easier to get from place to place	Moderate support	Very high support	Moderate support	Low support
Expand school nutrition programs	Moderate support	Moderate support	Moderate support	High support
Provide options for people to learn about buying and making healthy foods on a budget	Moderate support	Very high support	Moderate support	Low support
Make childcare options and early childhood education better fit the needs of families	Moderate support	Moderate support	Moderate support	Moderate support
Expand employment	Moderate support	Moderate support	Moderate support	Moderate support
Increase access to affordable health care	Moderate support	Very high support	Moderate support	Low support



*Feasibility was defined as how possible is the strategy in the community.

† The 13 policy, systems, and environmental strategies were generated during interviews with 30 practitioners and 42 family participants of rural areas in Arizona, Georgia, Kentucky, Michigan, and Texas.

‡ A subset of interview participants and SOS staff participated in the Delphi Panel (survey then focus group) to indicate their level of support for prioritizing strategies. These included 18 rural family participants speaking English, eight rural family participants speaking Spanish, 12 practitioners serving rural areas, and eight SOS staff.

§ The color of each box is associated with results from the Delphi Panel surveys. Colors indicate the weighted score for overall acceptability, appropriateness, and feasibility of a strategy.

Overall Acceptability, Appropriateness, and Feasibility

The overall acceptability, appropriateness, and feasibility score for each PSE strategy by participant group is shown in **Table 13**.

Make it easier to sign up for programs was the only strategy with very high support across all participant groups. Both English and Spanish speaking family groups scored all strategies as high or very high. Family participants speaking Spanish, relative to family participants speaking English, were especially likely to have very high scores for strategies – nine strategies had very high support from Spanish speaking families. In contrast, English speaking families and practitioners only had very high support for two strategies: *make more people aware of services* and *make it easier to sign up*. Likewise, SOS staff rated only two as very high: *make it easier to sign up for programs* and *expand school nutrition programs*. Practitioners had only moderate support for four of the other social supports: *expand employment*, *increase access to affordable health care*, *make housing more affordable*, and *provide options for people to learn about buying and making healthy foods on a budget*. Moreover, SOS staff were the only participant group to have low support for any strategy. See list below for detailed overall scores.

- Overall, *make it easier to sign up for programs*: scored very high among all participant groups.
- Overall, *make people more aware of services*: scored very high among family participants speaking English and practitioners, and high among family participants speaking Spanish and SOS team.
- Overall, *make it trouble free for people to use programs*: scored very high among family participants speaking Spanish, and high among family participants speaking English, practitioners, and SOS staff.
- Overall, *expand school nutrition programs*: scored very high among SOS staff and high among family participants speaking English, Spanish, and practitioners.
- Overall, *expand employment*: scored very high among family participants speaking Spanish, high among family participants speaking English and SOS staff, and moderate among practitioners.

- Overall, *increase access to affordable health care*: scored very high among family participants speaking Spanish, high among family participants speaking English and SOS staff, and moderate among practitioners.
- Overall, *make it easier to get from place to place*: scored very high among family participants speaking Spanish, high among family participants speaking English and practitioners, and moderate among SOS staff.
- Overall, *provide more places to get food locally*: scored very high among family participants speaking Spanish, high among family participants speaking English and practitioners, and moderate among SOS staff.
- Overall, *make childcare options and early childhood education better fit the needs of family participants*: scored very high among family participants speaking Spanish, high among family participants speaking English and practitioners, and moderate among SOS staff.
- Overall, *expand food banks*: scored very high among family participants speaking Spanish, high among family participants speaking English and practitioners, and low among SOS staff.
- Overall, *make housing more affordable*: scored high among family participants speaking English, Spanish, and SOS staff, and moderate among practitioners.
- Overall, *provide chances for people to suggest changes to programs*: scored high among family participants speaking English, Spanish, and practitioners and moderate among SOS staff.
- Overall, *provide options for people to learn about buying and making healthy foods on a budget*: scored very high among family participants speaking Spanish, high among family participants speaking English, moderate among practitioners, and low among SOS staff.



Table 13. Support for overall acceptability, feasibility, and appropriateness* of 13 PSE strategies by participant group^{‡§}

Policy, systems, and environmental strategies†	Rural family participants speaking English	Rural family participants speaking Spanish	Practitioners serving rural areas	SOS staff
Make it easier to sign up for programs	Very high support	High support	Moderate support	Low support
Make people more aware of services	High support	Moderate support	High support	Moderate support
Make it trouble free for people to use programs	Moderate support	High support	Moderate support	Moderate support
Expand school nutrition programs	Moderate support	Moderate support	Moderate support	High support
Expand employment	Moderate support	High support	Moderate support	Moderate support
Increase access to affordable health care	Moderate support	High support	Moderate support	Moderate support
Make it easier to get from place to place	Moderate support	High support	Moderate support	Moderate support
Provide more places to get food locally	Moderate support	High support	Moderate support	Moderate support
Make childcare options and early childhood education better fit the needs of families	Moderate support	High support	Moderate support	Moderate support
Expand food banks	Moderate support	High support	Moderate support	Low support
Make housing more affordable	Moderate support	Moderate support	Moderate support	Moderate support
Provide chances for people to suggest changes to programs	Moderate support	Moderate support	Moderate support	Moderate support
Provide options for people to learn about buying and making healthy foods on a budget	Moderate support	High support	Moderate support	Low support

Very high support
 High support
 Moderate support
 Low support

*This table displays the combined scores of acceptability (the likability of the strategy for your community), appropriateness (whether the strategy is a good match for the community), and feasibility (how possible is the strategy in the community).

† The 13 policy, systems, and environmental strategies were generated during interviews with 30 practitioners and 42 family participants of rural areas in Arizona, Georgia, Kentucky, Michigan, and Texas.

‡ A subset of interview participants and SOS staff participated in the Delphi Panel (survey then focus group) to indicate their level of support for prioritizing strategies. These included 18 rural family participants speaking English, eight rural family participants speaking Spanish, 12 practitioners serving rural areas, and eight SOS staff.

§ The color of each box is associated with results from the Delphi Panel surveys. Colors indicate the weighted score for overall acceptability, appropriateness, and feasibility of a strategy.

Timeline of Policy, Systems, and Environmental Strategy Implementation

Overall, the top strategies to prioritize within the next five years scored among all participant groups were: *make it easier to sign up for programs, make it trouble free for people to use programs, and expand food banks.*

Within the next two years, the top strategies for each group were prioritized:

- Among all participant groups, *make it trouble free for people to use programs* was selected the most, *make it easier to sign up for programs*, and *expand school nutrition programs* were selected the next most.
- Among the SOS staff, *make it easier to sign up for programs, make it trouble free for people to use programs, and expand school nutrition programs* were the top three most frequently selected.
- Among the practitioners, *make people more aware of services* was the most frequently selected, while *make it easier to sign up for programs, make it trouble free for people to use programs, and expand school nutrition programs* all tied for second most frequently selected.
- Among the family participants speaking English, *make it trouble free for people to use programs, make it easier to sign up for programs, and expand food banks* were the most frequently selected.
- Among the family participants speaking Spanish, *make it trouble free for people to use programs, expand food banks, expand school nutrition programs, and expand employment* tied for most frequently selected.

Within the next two to five years, the top strategies for each group were prioritized:

- Among all participant groups, *make people more aware of services, make it easier to sign up for programs, make it trouble free for people to use programs, expand food banks, and provide more places to get food locally* were selected most frequently.
- Among the SOS staff, *make people more aware of services* and *make it trouble free for people to use programs* were selected the most frequent, while *provide chances for people to suggest changes, and provide more places to get food locally* tied for second most frequently selected.

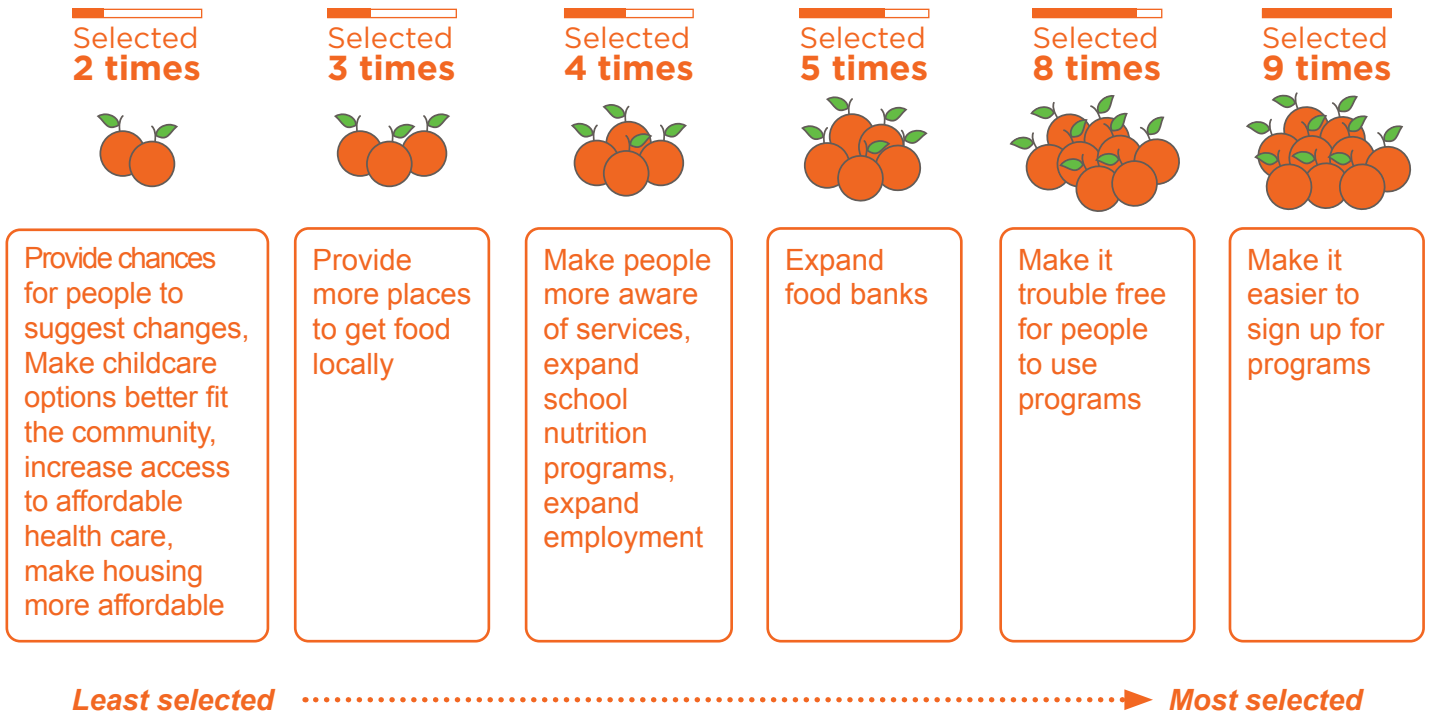
- Among the practitioners, *expand food banks, make people more aware of services, make it easier to sign up for programs, and expand school nutrition programs* were selected the most frequently.
- Among the family participants speaking English, *expand food banks and make housing more affordable* were selected the most frequently, while *make it easier to sign up for programs* and *make it trouble free for people to use programs* tied for second most frequently selected.
- Among the family participants speaking Spanish, *make it easier to sign up for programs, provide more places to get food locally, make childcare options and early childhood education better fit the needs of family participants, and increase access to affordable health care* all tied for most frequently selected.

Within the next five years or more, the top strategies for each group were prioritized:

- Among all participant groups, *make it easier to sign up for programs, expand employment, and make it trouble free for people to use programs* were selected the most frequently.
- Among the SOS staff, *provide chances for people to suggest changes and make childcare options better fit the community* were selected the most frequently, while *expand employment, increase access to affordable health care, and make housing more affordable* all tied for second most frequently selected.
- Among the practitioners, *make it easier to sign up for programs* was selected the most frequently, *expand employment* was selected the second most frequently, while *expand food banks* and *provide more places to get food locally* tied for third most frequently selected.
- Among the family participants speaking English, *make people more aware of services, make it easier to sign up for programs, and make it trouble free for people to use programs* were selected the most frequently.
- Among the family participants speaking Spanish, *make it easier to sign up for programs, make it trouble free for people to use programs, and expand employment* were selected the most frequently.

Figure 5. Most to least scored PSE strategies to address in the next 0-5 years

* The top ranked strategies across participant groups were summed to strategize the strategies to address.



Additional Policy, Systems, and Environmental Strategies and Activities

The final section of the survey asked participants to add any PSE strategies and activities that may be missing. These components were added to the final list as appropriate. The following are suggested PSE strategies which are different from the original PSE strategies and activities.

- Within *make it trouble free for people to use programs*, add create a local coalition for food insecurity.
- Within *make it trouble free for people to use programs*, add improve food access through convenience stores.
- Within *expand food banks*, add provide access to basic necessities like shampoo, toilet paper, and soap.
- Within *expand school nutrition programs*, add provide funding for school nutrition programs to provide snacks.
- Within *expand employment*, add universal basic income.

- Within *expand employment*, add provide ways for family participants to grow savings and wealth.
- Within *increase access to affordable health care*, add provide pregnancy and postpartum healthcare support.

Focus Group Results

Four focus groups with each participant group (SOS staff, practitioners, family participants speaking English, family participants speaking Spanish) were conducted to discuss the survey rankings. Each focus group chose the strategies to discuss at length and therefore some strategies were not discussed due to time constraints.

Share Our Strength Staff

Among **SOS staff**, areas of consensus or no consensus were discussed for each strategy. Overall, SOS staff reached consensus that the following strategies should be prioritized: *make people more aware of programs, make it easier to sign up for programs, make it trouble free for people to use programs, provide chances for people to suggest changes to programs, expand school nutrition programs, make childcare options and early childhood education better fit the needs of family participants with low income, expand employment, increase access to affordable health care, make housing more affordable, and make it easier to get from place to place.* SOS staff reached consensus that *expand food banks and provide options for people to learn about buying and making healthy food on a budget* are not priorities. *Provide more places for people to get food locally* was not discussed among the SOS staff.

Strategies reaching consensus among SOS staff during the focus groups were:

- In Delphi surveying, *make people more aware of programs*, had high support for appropriate, acceptable, feasible and was perceived as a priority in the next 0-5 years. SOS staff brainstormed the idea of hiring trusted and known community navigators to facilitate increasing awareness and assisting with participating in programs in rural communities.

“I think trusted messengers are really critical in rural communities, for both signing up and all of the things that go with accessing and wanting to participate in a program like this. Some of these things really speak to changing the system at the state level, and their willingness to make it easier for people to sign up. And to use the data they already have to connect people from one program to another.”

— **SOS staff**

- In Delphi surveying, *make it easier to sign up for programs*, had very high support for appropriate, acceptable, feasible and was perceived as a priority in the next 0-5 years. SOS staff discussed the idea of creating one-stop-shops in rural communities to help with signing up for programs and to alleviate the burden of transportation.

“I’m not surprised to see [make it easier to sign-up for programs] at the top. I also think it’s connected to some of the other strategies too. So the school meals one, by making it easier to sign up for these programs, people will then be able to have access to other services potentially.”

— **SOS staff**

- In Delphi surveying, *make it trouble free for people to use programs*, had high support for appropriate, acceptable, feasible and was perceived as a priority in the next 0-5 years. SOS staff believed that once signing up is simpler it would be easier to use programs, and how programs like SNAP, and WIC would benefit from clarifying the participant recertification process.

“I agree with the different formats. I’m also thinking about making sure there are translation services, and the readability is appropriate.”

— **SOS staff**

- In Delphi surveying, *provide chances for people to suggest changes to programs*, had moderate support for appropriate, acceptable, feasible and was perceived as a priority in the next 0-5 years. SOS staff believed they may be in a better position to advocate for policy changes as compared to family participants living in rural communities.

“I think there's a lot that we do at the policy level, which I think would affect more of the obstacles to enrolling in programs, expansion of programs. I feel like, how things would get implemented from a policy perspective, versus in the field, local level perspective. I think that that's also operating here.”

— **SOS staff**

- In Delphi surveying, *expand school nutrition programs*, had very high support for appropriate, acceptable, feasible and was perceived as a priority in the next 0-5 years. SOS staff noted that schools are a critical location in rural communities although SOS staff mentioned difficulty with determining what expansions could look like. SOS staff noted that school meal programs are a current priority within their organization.

“When I look at some of this I think about what is constricted by USDA, and their own standards. Versus what are things that they could do outside of their federal nutrition programs, that can still be under the school nutrition umbrella. Like the teaching food skills, that's a student engagement tactic for sure. But it's not heavily regulated in the way that serving more meals at school is. Or making standards easier. That's not necessarily within a school's control.”

— **SOS staff**

- In Delphi surveying, *make childcare options and early childhood education better fit the needs of family participants with low income*, had moderate support for appropriate, acceptable, and feasible and was perceived as a priority in the next 0-5 years. SOS staff thought this should have been scored higher as there were concerns that minimal childcare options may affect other factors for family participants like caregivers' employment. SOS staff mentioned childcare is not a current priority of their work.

- In Delphi surveying, *expand employment*, had high support for appropriate, acceptable, feasible and was perceived as a priority in the next 0-5 years. SOS staff discussed how minimum wage may be a root cause concern in rural places, although there was difficulty in assessing how feasible it was for their team to make changes to minimum wage and job opportunities.
- In Delphi surveying, *increase access to affordable health care*, had high support for appropriate, acceptable, feasible and was perceived as a priority in the next 0-5 years. Similar to expanding employment, SOS staff discussed how healthcare access may be a root cause concern in rural places, although there was difficulty in assessing the feasibility for their team to address.
- In Delphi surveying, *make housing more affordable*, had high support for appropriate, acceptable, feasible and was perceived as a priority in the next 0-5 years. SOS staff discussed the deep concern of limited housing in affordable areas and noted that there is a need for more housing options. Ideas were shared that making housing more affordable alone will not address the root cause issue.

“In terms of feasibility for some of those that are in the middle like housing. I feel like housing, for most parts of rural is sparse. Where there's not a lot of housing. There's a deficiency altogether with housing. So just if it was affordable, is not, there's another deeper issue around just affordability of housing, and good housing is another issue.”

— **SOS staff**

- In Delphi surveying, *make it easier to get from place to place*, had moderate support for appropriate, acceptable, and feasible. SOS staff thought this should be scored higher as transportation is of concern in rural communities.

“I’m thinking about this specifically in the context of rural communities too, two things I’m thinking about are transportation and internet access. In some cases you need to do things online and that’s a challenge. In some cases you need to be in person and that’s a huge challenge.”

— **SOS staff**

Strategies which did not reach consensus during the focus groups with SOS staff were:

- In Delphi surveying, *expand food banks*, had low support for appropriate, acceptable, feasible. SOS staff viewed food banks as a temporary solution and suggested addressing applying other strategies before food banks.
- In Delphi surveying, *provide options for people to learn about buying and making healthy food on a budget*, had low support for appropriate, acceptable, and feasible. SOS staff noted a few limitations with food skills education such as teaching about foods which may not be accessible in rural places, therefore the education is not very relevant. Although SOS agreed that nutrition education can be valuable, there was agreement there are other priorities to focus on first.

“When talking about providing options for people to learn how to buy and make healthy foods on a budget, if you can’t access the foods to buy them in the first place because there isn’t a grocery store nearby, or you don’t have the financial resources to buy that food and it’s incredibly difficult for you to sign up for SNAP, I kind of thought about it when I filled this out of, there are certain conditions that need to be met for you to be able to even do some of these other things.”

— **SOS staff**

Practitioners

Among the **practitioners**, areas of consensus or no consensus were discussed for the rankings of each strategy. Overall, practitioners prioritized *make people more aware of programs, make it easier to sign up for programs, make it trouble free for people to use programs, provide chances for people to suggest changes to programs, expand school nutrition programs, provide options for people to learn about buying and making healthy food on a budget, expand employment, make housing more affordable, and make it easier to get from place to place*. Practitioners reached consensus that *expand food banks* is not a priority. *Provide more places for people to get food locally, make childcare options and early childhood education better fit the needs of family participants with low income, and increase access to affordable health care* were not discussed among practitioners.

Strategies reaching consensus among practitioners during the focus groups were:

- In Delphi surveying, *make people more aware of programs*, had very high support for appropriate, acceptable, and feasible and was perceived as a priority in the next 0-5 years. Practitioners mentioned ways they are currently spreading awareness through word of mouth. Practitioners also mentioned that in order to share about new programs, they would need to familiarize themselves with programs first.

“It definitely is interesting to see, especially for things like A [make people more aware of services], where you see the practitioner group is the most... Ranks that the highest, as far as making people more aware of services. I feel like as someone who works in the field, I’m constantly having to advocate and tell folks about the services we offer. Then services that are available to them, that I thought would be common knowledge, but is not always the case.”

— **Practitioner**

- In Delphi surveying, *make it easier to sign up for programs*, had very high support for appropriate, acceptable, feasible and was perceived as a priority in the next 0-5 years. Practitioners noted it would be helpful to have a community location to help sign up for programs and agreed that the applications are challenging to complete as they have helped people enroll. Although this strategy was noted by practitioners as difficult to achieve, there was agreement it should be a priority.

“[Make it easier to sign up for programs] should be a priority nationwide because of the amount of those in need, and making this more accessible for our young families/elders/veterans.”

— *Practitioner*

- In Delphi surveying, *make it trouble free for people to use programs*, had high support for appropriate, acceptable, feasible was perceived as a priority in the next 0-5 years. Practitioners agreed there should be support for family participants using programs to them easier to use. Suggestions include better phone applications and reducing barriers by being able to upload documents through their phone.
- In Delphi surveying, *provide chances for people to suggest changes to programs*, had high support for appropriate, acceptable, feasible. Practitioners highlighted the importance of receiving family suggestions for changes, but worried that barriers such as federal regulations would impact their ability to implement these suggestions.
- In Delphi surveying, *expand school nutrition programs*, had high support for appropriate, acceptable, feasible and was perceived as a priority in the next 0-5 years. Practitioners elaborated that school nutrition programs are a major part of rural communities and should be prioritized, as these programs reach a lot of youth.

“I was surprised about [expand school nutrition services]. I mean, the family participants that speak English rated that one [low], the Child Nutrition Program, they didn't really seem to think that was super important, which that surprises me because, most kids go to school and most kids eat at school. But I get it, I guess. Being in that field, I'm like, I feed everybody so I don't know why that one was so low with parents.”

— *Practitioner*



- In Delphi surveying, *provide options for people to learn about buying and making healthy food on a budget*, had moderate support for appropriate, acceptable, and feasible. Practitioners thought food skills education should be ranked higher as there are many educational opportunities serving their state such as the Expanded Food and Nutrition Education Program and SNAP-Ed as well as in-person and virtual opportunities.
- In Delphi surveying, *expand employment*, had high support for appropriate, acceptable, feasible and was perceived as a priority in the next 0-5 years. Practitioners agreed that there are concerns with limited job opportunities in rural areas, although practitioners identified having minimal control over employment. One practitioner mentioned that they work at a food bank, which employs local community members.

“I was wondering if some of the participant groups ranked [expand employment] lower just because it's not something that is easily controlled by social workers, or people involved with people in the field, to expand employment. It's very hard to get your economy up and going. I mean, there's not a lot you can do. Although it showed it was in the top four or something. So, it would be great if we could do it, but we don't know if it actually would work in the community.”

— *Practitioner*

- In Delphi surveying, *make housing more affordable*, had moderate support for appropriate, acceptable, feasible. Practitioners thought housing should be scored higher, as there are concerns with affordable housing in rural places for example, one practitioner talked about housing costs are very high in their community, meaning even previously affordable housing is rising and becoming a large burden to families.
- In Delphi surveying, *make it easier to get from place to place*, had high support for appropriate, acceptable, and feasible. Practitioners agreed with the high score of this strategy, as public transportation is often limited in rural communities. Practitioners did acknowledge that although important, they may not be able to create change for this infrastructure.

“I think that those things are things that we might be able to help with, or have control over, where the ones at the bottom, we don't really have control over that. I mean, I don't know how we could expand employment. I mean, there's no where to work out here, and you have to drive very far into town...I mean, those are the top three I think, are some things that we might have control over and that we could help people with. The others, I don't see making a change in that.”

— *Practitioner*

Strategies which did not reach consensus during the focus groups with practitioners were:

- In Delphi surveying, *expand food banks*, had high support for appropriate, acceptable, feasible and was perceived as a priority in the next 0-5 years. There were mixed feelings among practitioners on food banks. Some supported the ranking as food banks in rural communities may be helpful, while others were surprised at the high ranking as food banks may not serve as many people.

“I was going to say, I'm shocked to see E, expand food banks, as high as it is. The reason that I say that is that in my area, there are a lot of food banks who have seen a drastic decrease in the last couple of years of folks attending or requesting services, or coming in for food boxes. That may just be unique to the area that I'm in, or it could just be that things are improving... It's interesting, and we've actually had a couple of food distribution sites consolidate and better be able to offer more but at smaller sites.”

— *Practitioner*

“Looking at the top five, it makes perfect sense to me as to why those would be ranked higher. I think as we get below, expand school nutrition programs...it's probably unique to a lot of the different folks that completed the survey. But looking at those top five makes perfect sense, because people want ease of access, they want more access, but it looks different for every community. We have one food bank here, and then we have one food bank, but they lost their nonprofit status. We have one church pantry that does distribution, and I can see that lineup, but they have very, very limited food supply... Households struggle with transportation in rural communities, so our community folks do not participate in the [name of town] food bank, and they don't reach out beyond their area. So, I see why food bank access is high up there.”

— *Practitioner*



Family participants speaking English

Among the **family participants speaking English**, areas of consensus or no consensus were discussed for the rankings of each strategy. Overall, family participants speaking English prioritized *make people more aware of programs, make it easier to sign up for programs, make it trouble free for people to use programs, expand food banks, expand employment, make housing more affordable, and make it easier to get from place to place*. Family participants speaking English reached consensus that *provide options for people to learn about buying and making healthy food on a budget* are not priorities. *Provide chances for people to suggest changes to programs, expand school nutrition programs, provide more places for people to get food locally, make childcare options and early childhood education better fit the needs of family participants with low income, and increase access to affordable health care* were not discussed among family participants speaking English.

Strategies reaching consensus among family participants speaking English during the focus groups were:

- In Delphi surveying, *make people more aware of programs*, had very high support for appropriate, acceptable, and feasible and was perceived as a priority in the next 0-5 years. Family participants speaking English mentioned challenges with finding out about what programs exist in their communities. Community members also discussed that advertisements of the programs were often minimal and stated that families were often unaware of programs until absolutely vital.

“All the information is only really in those bigger cities, and they kind of forget about the little outskirts towns. So, unless you are aware of them, they don't even really come to these areas. I think they need to make more people aware of it in our areas that are more outside of city limits and outside of areas that are not directly where ... The offices of [name of social service office] is in [name of town], but nobody outside of [name of town] really knows anything about it because they are not there.”

— Family participant speaking English

- In Delphi surveying, *make it easier to sign up for programs*, had very high support for appropriate, acceptable, feasible and was perceived as a priority in the next 0-5 years. Family participants speaking English noted that social service applications take a considerable amount of time, are confusing, and people are not respectful throughout the process.

“Making offices available where you can walk in [would be helpful]. Right now, we have an office, but there's literally a sign on the door that says, “No walk-ins welcome.” How does that help for people like, for example, my mother-in-law? She would never feel comfortable doing this all online.”

— Family participant speaking English

“They should make the application shorter because there's a lot of questions that they ask you, and a lot of people don't understand them. They don't understand what they're asking them for. It would be a lot better. Also, you have to fill out this long application, then send it off in the mail, and then you still have to wait another 45 days at that.”

— Family participant speaking English

- In Delphi surveying, *make it trouble free for people to use programs*, had high support for appropriate, acceptable, feasible and was perceived as a priority in the next 0-5 years. Family participants speaking English noted concerns with utilizing programs like living in city limits in order to use food banks, the amount of money received, technology such as apps do not always work properly, and feelings of judgement when checking out at grocery stores.

“I remember when I first applied for SNAP, it took me like two months just to get approved. And then after I got approved they wanted a lot of information. Honestly, I just think it's not fair.”

— *Family participant speaking English*

- In Delphi surveying, *expand food banks*, had high support for appropriate, acceptable, feasible and was perceived as a priority in the next 0-5 years. Family participants speaking English noted concerns that food banks are difficult to get to especially with limited transportation and there are restrictions on the amount of food received.
- In Delphi surveying, *expand employment*, had high support for appropriate, acceptable, feasible. Family participants speaking English thought employment should be more of a time priority as there are concerns that minimum wage does not meet the cost of living and there were concerns with finding out about job postings in rural places. Although participants noted that increasing minimum wage would be helpful, there were concerns that this change would decrease the benefits received from social services.



“You get on these websites, Indeed, and all these different websites. If you're living in a small rural town, they're not going to have the job openings on there in your little bitty town. So, I think that is a big problem too because I'm in a small town, but there's bigger cities around me. So, on websites, Indeed, you always find jobs around you, and you don't find them in your little city. And I think that is the biggest thing with our issue, is people are looking for jobs. But a lot of people don't have transportation to get 20 miles to the job that they applied for on Indeed. There's a lot of people that I have that will be like, "Well, I'll walk to the job.”

— *Family participant speaking English*

- In Delphi surveying, *make housing more affordable*, had high support for appropriate, acceptable, feasible. Family participants speaking English had concerns that there are minimal affordable housing opportunities. Some discussed living in a destination location, drastically impacting the cost of housing in the past few years, while others talked about the general limited housing options in the community, increasing demand and price of housing in these rural places.

“I have [name of state subsidized housing], which helps because otherwise, my house would be like \$900 or a thousand dollars. But there's other people who have [name of state subsidized housing] but they can't get anywhere to go. There's no one who will rent to them.”

— *Family participant speaking English*

- In Delphi surveying, *make it easier to get from place to place*, had high support for appropriate, acceptable, and feasible and was perceived as a priority in the next 0-5 years. Family participants speaking English had concerns about minimal transportation in rural areas and noted this should be a prioritization and addressed soon. With surrounding larger towns having better access to jobs and food banks, transportation was discussed as a barrier to connecting families with these resources.

Strategies which did not reach consensus during the focus groups with family participants speaking English were:

- In Delphi surveying, *provide options for people to learn about buying and making healthy food on a budget*, had high support for appropriate, acceptable, and feasible. Family participants speaking English noted there should be other priorities before nutrition education as recipes and nutrition information is easily accessed through the internet.

“I can search online all day long and find healthy meal and budget meals. I can do it all myself. I think we need to focus on getting people the help and making sure they can actually do it in a quickly, easily, and efficient way.”

— **Family participant speaking English**

Family participants speaking Spanish

Among the **family participants speaking Spanish**, areas of consensus or no consensus were discussed for the rankings of each strategy. Overall, family participants speaking Spanish prioritized, *make it easier to sign up for programs, make it trouble free for people to use programs, provide chances for people to suggest changes to programs, expand food banks, expand employment, increase access to affordable health care, make housing more affordable, and make it easier to get from place to place. Make people more aware of programs, expand school nutrition programs, provide more places for people to get food locally, provide options for people to learn about buying and making healthy food on a budget,*

and *make childcare options and early childhood education better fit the needs of family participants with low income* were not discussed among family participants speaking Spanish.

Strategies reaching consensus among family participants speaking Spanish during the focus groups were:

- In Delphi surveying, *make it easier to sign up for programs*, had very high support for appropriate, acceptable, feasible and was perceived as a priority in the next 0-5 years. Family participants speaking Spanish had concerns with immigrants signing up for programs as not all of the documents (i.e. legal documentation such as visas, citizenship documentation, passports, etc.) were available.
- In Delphi surveying, *make it trouble free for people to use programs*, had very high support for appropriate, acceptable, feasible and was perceived as a priority in the next 0-5 years. Family participants speaking Spanish shared about challenges with obtaining food from food banks as many documents are required to receive food. One suggestion is to make the food bank enrollment criteria more lenient for community members.

“Many people, especially us migrants, sometimes don't have the necessary documentation to access programs, whether they are community programs or even healthcare programs. Sometimes, they will only provide assistance if you have the required documents. So, even if you show valid identification, like a passport, many places no longer accept passports.”

— **Family participant speaking Spanish**

- In Delphi surveying, *provide chances for people to suggest changes to programs*, had high support for appropriate, acceptable, feasible. Family participants speaking Spanish noted that individuals identifying as Hispanic oftentimes feel underrepresented. Suggestions for inclusion mentioned were having a council within communities for everyone to feel included and having bilingual staff at schools and other commonly visited sites.

“I think it's important for us to have a voice. They have a Council here, and they make decisions for the community, but there needs to be representatives from the Hispanic community.”

— *Family participant speaking Spanish*

- In Delphi surveying, *expand food banks*, had very high support for appropriate, acceptable, feasible and was perceived as a priority in the next 0-5 years. Family participants speaking Spanish had concerns with the limited number of food banks in the communities lived as well as only being able to get food once per month, which was not enough. Suggestions for improving food banks included expanding hours of operation and having less enrollment paperwork.

“There are food banks, and sometimes they give us expired food and things we don't need. Almost everything is expired. Or, the date has already passed.”

— *Family participant speaking Spanish*

- In Delphi surveying, *expand employment*, had very high support for appropriate, acceptable, feasible and was perceived as a priority in the next 0-5 years. Family participants speaking Spanish noted the importance for people to be employed in the current economic situation, although the pay did not meet the cost of living.

“[Increase] the wages. Rent is very expensive here, and we can't afford it. For two rooms, you have to pay \$1500.”

— *Family participant speaking Spanish*

- In Delphi surveying, *increase access to affordable health care*, had very high support for appropriate, acceptable, feasible and was perceived as a priority in the next 0-5 years. Family participants speaking Spanish noted that eligibility to enroll in health care-related social services should be simpler to apply for. Another suggestion was to make the cost of accessing healthcare more affordable.
- In Delphi surveying, *make housing more affordable*, had high support for appropriate, acceptable, feasible. Family participants speaking Spanish had concerns with how expensive rent is, and oftentimes competes with other expenses.
- In Delphi surveying, *make it easier to get from place to place*, had very high support for appropriate, acceptable, and feasible. Family participants speaking Spanish believed transportation in their community should be a prioritization and addressed sooner as there is no public transportation and it would be helpful. Participants also noted a few challenges, such as the transportation schedule was not flexible, may be expensive to use, and the high gas prices competed with other financial priorities.



Additional Policy, Systems, and Environmental Strategies and Activities

Additional Policy, Systems, and Environmental Strategies and Activities mentioned during the focus groups include:

- Within *make people more aware of programs*, add support practitioners in learning about programs to help enroll family participants.

“I think that I would probably need to educate myself in the services, because I'm not really familiar with what's out there besides the P-EBT, and the SNAP benefits, and then the healthcare services.”

— *Arizona Practitioner*

- Within *make it trouble free for people to use programs*, add expand internet access to help with using programs and applying for jobs.

“I would just build on some of that and say, if I'm thinking about this specifically in the context of rural communities too, two things I'm thinking about are transportation and internet access. And in some cases you need to do things online and that's a challenge. In some cases you need to be in person and that's a huge challenge.”

— *SOS staff*

- Within *make it trouble free for people to use programs*, add build relationships between practitioners and family participants to help tailor programs and help make people feel welcome.

“I think trusted messengers are really critical in rural communities, for both signing up and all of the things that go with accessing and wanting to participate in a program like this. Some of these things really speak to changing the system at the state level, and their willingness to make it easier for people to sign up and to use the data they already have to connect people from one program to another.”

— *SOS staff*

- Within *expand food banks*, add have taste testing for foods commonly found in food banks.

“We just kept getting chickpeas [at the food bank], and everyone's like, “Why do we keep getting all these chickpeas? What are we going to even do with them?” So, we started putting together recipes, and I had one of my workers make the recipes. So, for a month, every time they came to the pantry, anytime somebody came for that week, they got to try chickpeas.”

— *Kentucky Practitioner*

- Within *expand employment*, add post jobs in a community location.

“I think with that is you get on these websites, Indeed, and all these different websites. But if you're living in a small rural town, they're not going to have the job openings on there in your little bitty town. So, I think that is a big problem too because I'm in a small town, but there's bigger cities around me.”

— *Kentucky family participant*





Final List of Policy, Systems, and Environmental Strategies for Families in Rural Places

The final list of PSE strategies were developed by incorporating additions from the survey and focus group results. **Figure 6** shows the final set of PSE strategies and activities to ensure family food security in rural places:

Figure 6. Final policy, system, and environment strategies and activities to ensure family food security in rural places

Make people more aware of programs

- Advertising for these programs in creative ways such as through social media
- Advertising these programs in many locations in the community
- Local community members sharing how to sign up and use these programs
- Organizations employing bi-lingual staff members to tell people about programs
- Support practitioners in learning about programs to help enroll families

Make it easier to sign up for programs

- Making sure there are local offices in rural communities where people can go to sign up for these programs
- Make program applications shorter
- Allow people to fill out one application that can be used for all of these programs

Make it trouble free for people to use programs

- Make it faster to start using these programs
- Change program rules for how people can use money or services
- Allow people to receive program services on the phone, video, or computer
- Make it easier to check out at grocery stores when using SNAP and WIC
- Make it easier to keep using and stay on these programs
- Make it easier for immigrants to use these programs
- Follow-up with families that are receiving programs
- Create a local coalition for food insecurity
- Improve food access through convenience stores
- Expand internet access to help with using programs and applying for jobs
- Build relationships between practitioners and families to help tailor programs and help make people feel welcome
- Continue programs during transitions of income changes

Provide chances for people to suggest changes to programs

- Offer ways for people to share their ideas for changes to policies
- Advocate for an increase in the amount of money that programs can give people
- Create more programs that help families after WIC ends when kids turn 6 years old

Expand food banks

- Open food banks for more hours
- Let people choose the foods they get at the food bank
- Provide more foods that give people from various cultures a “taste of home”
- Provide more foods that are good for food allergies or special diets like low sodium
- Increase funding for food banks
- Create food banks inside existing community spaces like churches, schools, health care clinics
- Build food banks in places that are easier to get to
- Provide more foods that are appealing
- Provide access to basic necessities like shampoo, toilet paper, and soap
- Have taste testing for foods commonly found in food banks

Expand school nutrition programs

- Serve more food during meals at school
- Provide free school lunch for all students
- Provide more places for school-age children to get meals
- Provide more school foods that give people from various cultures a “taste of home”
- Give leftover foods to students or food banks
- Make nutrition standards easier
- Create more summer free-food programs for school-age children
- Provide after school programs
- Provide more school supply drives
- Create more backpack programs that send kids home with food
- Teach nutrition and food skills to students at school
- Provide funding for school nutrition programs to provide snacks

Provide more places to get food locally

- Start community gardens
- Let people donate meat from hunting to food banks
- Provide discounts at farmer’s markets
- Make the food at farmer’s markets less expensive
- Create mobile farmer’s markets
- Provide prescriptions for fruits and vegetables at health care clinics
- Work with food banks to offer fresh local foods



Provide options for people to learn about buying and making healthy foods on a budget

- Provide classes and resources in multiple languages
- Provide food skills classes online (website, Facebook, Instagram, YouTube)
- Provide cooking classes and finance classes (budgeting, saving)
- Provide food preservation classes (canning foods, freezing foods)
- Provide food safety classes

Make childcare options and early childhood education better fit the needs of families with a low income

- Provide bookmobiles and mobile libraries
- Provide free preschool
- Open more childcare locations
- Open childcare facilities for more hours

Expand employment

- Increase the minimum wage
- Create more job opportunities
- Provide people with more help when searching and applying for a job
- Universal basic income
- Provide ways for families to grow savings and wealth
- Post jobs in a community location



Make housing more affordable

- Provide help for paying for gas, electric, water, and other utilities
- Create limits on how much a family must pay for gas, electric, water, and other utilities
- Build more places to live that cost less



Increase access to affordable healthcare

- Provide more health care options that cost less
- Provide mobile medical vans
- Provide more options for affordable mental health services
- Provide pregnancy and postpartum healthcare support



Make it easier to get from place to place

- Lower gas prices
- Provide free public transportation



Final Prioritization of Policy, Systems, and Environmental Strategies for Families in Rural Communities

Taken together, the interview, survey, and focus group findings are summarized to show the 13 PSE strategies, the levels of support as indicated in the survey, and the areas of consensus or no consensus as indicated in the focus groups ([Table 14.](#))

One strategy, *make it easier to sign up for programs*, scored very high and reached consensus that it should be a priority. Overall, *make it easier to sign up for programs*, *make it trouble free for people to use programs*, *expand employment*, *make housing more affordable*, and *make it easier to get from place to place* reached consensus that these strategies should be priorities in rural communities, although they were not all scored very high.

Eight of the strategies reached consensus among family participant groups and eleven strategies among the practitioners and SOS staff. Practitioners and SOS staff reached consensus that *expand school nutrition services* should be a priority, while both family participant groups did not discuss school meals. Both family participant groups reached consensus that expand food banks should be a priority, while practitioners and SOS staff did not prioritize it.

No participant groups discussed *provide more places to get food locally*. Only SOS staff discussed *make childcare options and early childhood education better fit the needs of families*.

Participant groups prioritized strategies to address for family food security in rural communities in the following way:

- *Make it easier to sign up for programs*, scored very high and was a priority among all participant groups.
- *Make it trouble free for people to use programs*, scored very high or high and was a priority among all participant groups.



- *Expand employment*, scored very high or high among all participant groups and agreement was reached among all groups this should be a priority.
- *Make it easier to get from place to place*, scored very high to moderate among all participant groups and after discussion, agreement was reached this should be a priority.
- *Make housing more affordable*, scored high or moderate among all participant groups and agreement was reached this should be a priority among all groups.
- *Make people more aware of services*, scored very high or high among all participant groups and was a priority among family participants speaking English, practitioners, and SOS staff, although not discussed among family participants speaking Spanish.
- *Provide chances for people to suggest changes to programs*, scored high or moderate among all participant groups and after discussing agreement was reached it should be a priority. Not discussed among family participants speaking English.
- *Expand school nutrition programs*, scored very high or high among all participant groups and agreement was reached among the practitioners and SOS staff it should be a priority. It was not discussed among the family participant groups.
- *Increase access to affordable health care*, scored very high to moderate among all participant groups and agreement was reached among family participants speaking Spanish and SOS staff that it should be a priority. It was not discussed among family participants speaking English or practitioners.

- *Expand food banks*, scored low to very high among all participant groups and agreement was reached among the family participant groups this should be a priority.
- *Make childcare options and early childhood education better fit the needs of families*, scored very high to moderate among all participant groups and agreement was reached among SOS staff that it should be a priority. It was not discussed among family participants speaking English, Spanish, or practitioners.
- *Provide options for people to learn about buying and making healthy foods on a budget*, scored very high to low among all participant groups and reached agreement among practitioners that it should be a priority. It was not discussed among family participants speaking Spanish. SOS staff and family participants speaking English did not reach consensus that it was a priority.
- *Provide more places to get food locally*, scored moderate to very high among all participant groups, although was not discussed in any of the focus groups.



Table 14. Level of support and areas of consensus or no consensus for each strategy among participant groups†

Policy, systems, and environmental strategies*	Rural family participants speaking English‡§	Rural family participants speaking Spanish‡§	Practitioners serving rural areas‡§	Share Our Strength staff (SOS)‡§
Make it easier to sign up for programs				
Make people more aware of services		●		
Make it trouble free for people to use programs				
Expand employment				
Make it easier to get from place to place				
Make housing more affordable				
Provide chances for people to suggest changes to programs	●			
Expand school nutrition programs	●	●		
Increase access to affordable health care	●		●	
Expand food banks			▲	▲
Make childcare options and early childhood education better fit the needs of families	●	●	●	
Provide options for people to learn about buying and making healthy foods on a budget	▲	●		▲
Provide more places to get food locally	●	●	●	●

Very high support	Moderate support	Not discussed in focus groups	No consensus in focus groups
High support	Low support		

* The 13 policy, systems, and environmental strategies were generated during interviews with 30 practitioners and 42 family participants of rural areas in Arizona, Georgia, Kentucky, Michigan, and Texas.

† A subset of interview participants and SOS staff participated in the Delphi Panel (survey then focus group) to indicate their level of support for prioritizing strategies. These included 18 rural family participants speaking English, eight rural family participants speaking Spanish, 12 practitioners serving rural areas, and eight Share Our Strength staff.

‡ The color of each box is associated with results from the Delphi Panel surveys. Colors indicate the weighted score for overall acceptability, appropriateness, and feasibility of a strategy. No dot indicates that consensus was reached.

§ The overlay is associated with the Delphi Panel focus groups. They indicate whether consensus was reached on prioritizing the strategy, more discussion is needed about prioritization, or it was not discussed in the focus group. These included seven rural family participants speaking English, three rural family participants speaking Spanish, five practitioners serving rural areas, and seven Share Our Strength staff.

Discussion and Conclusions

This project worked with rural practitioners and families, as well as Share Our Strength, to identify acceptable, appropriate, and feasible PSE strategies and associated activities, as well as prioritize them for family food security in rural communities. The 13 PSE strategies and associated activities identified by project activities indicate that supporting food security for families in rural communities requires a comprehensive approach across multiple sectors. PSE strategies and associated activities were wide-ranging, from making it easier for people to sign up for programs to expanding employment to increasing access to affordable health care. Clearly, a multi-pronged approach to align policies, systems, and environments that support family food security in a way that is acceptable, appropriate, and feasible for rural communities is necessary. With these findings in hand, SOS can direct resources and efforts as well as leverage its diverse network of partners to support planning and implementation of these strategies for family food security in rural communities that best meet local community needs.

Overall, the three strategies with greatest support from the survey and those which mostly reached consensus during the focus groups to prioritize were: *Make it easier to sign up for programs, make people more aware of services, make it trouble free for people to use programs*. Because the strategies focused on programs, it is important to note that awareness of social services was lower among family participants compared to practitioners. Additionally, one unique attribute of this study is the diversity and bilingual representativeness of participants.

Make it easier to sign up for programs had the highest support and most consensus. Potential activities to achieve this strategy are to make sure there are local offices in rural communities where people can go to sign up for these programs, make program applications shorter, and allow people to fill out one application that can be used for all of these programs.

Make people more aware of programs had the second highest support and consensus. Potential activities to achieve this strategy are advertise for these programs in creative ways such as through social media, advertise these programs in many locations in the community, local community members sharing how to sign up and use these programs, organizations employ bi-lingual staff members to tell people about programs, and support practitioners in learning about programs to help enroll families.

Make it trouble free for people to use programs had the third highest support and consensus. Potential activities to achieve this strategy are make it faster to start using these programs, change program rules for how people can use money or services, allow people to receive program services on the phone, video, or computer, make it easier to check out at grocery stores when using SNAP and WIC, make it easier to keep using and stay on these programs, make it easier for immigrants to use these programs (i.e., reducing barriers to sign up), follow-up with families that are receiving programs with support for using the program and re-enrollment, create a local coalition for food insecurity, improve food access through convenience stores, expand internet access to help with using programs and applying for jobs, develop relationships between practitioners and families to help make people feel welcome, and continue programs during transitions of income changes.

Three strategies did not reach consensus on the prioritization: *make childcare options and early childhood education better fit the needs of families, provide options for people to learn about buying and making healthy foods on a budget, and provide more places to get food locally*.

Make childcare options and early childhood education better fit the needs of families had lower support and was not discussed among the two family participant groups or the practitioners. Potential activities to achieve this strategy are provide bookmobiles and mobile libraries, provide free preschool, open more childcare locations, and open childcare facilities for more hours.

Provide options for people to learn about buying and making healthy foods on a budget had lower support and did not reach consensus about the prioritization during the family participant speaking English and SOS staff focus groups. It was not discussed in the family participant speaking Spanish focus group. Potential activities to achieve this strategy are provide classes and resources in multiple languages, provide food skills classes online (website, Facebook, Instagram, YouTube), provide cooking classes; provide finance classes (budgeting, saving), provide food preservation classes (canning foods, freezing foods), and provide food safety classes.

Provide more places to get food locally had lower support and was not discussed during any of the focus groups. Potential activities to achieve this strategy are start community gardens, let people donate meat from hunting to food banks, provide discounts at farmer's markets, make the food at farmer's markets less expensive, create mobile farmer's markets, provide prescriptions for fruits and vegetables at health care clinics, and work with food banks to offer fresh local foods.

Figure 7. Recommendations for planning and implementation of PSE strategies and activities to ensure family food security in rural places





When planning for and implementing the PSE strategies and activities in rural communities, leveraging assets and working with challenges to tailor programming for local communities is essential. The following shows overarching recommendations that were gathered from the three step process, along with ideas for a few possible next steps:

- **Families in rural communities desire to be self-sufficient and, when needed, draw upon trusted people and organizations from the local community.**
- **A concerted effort to increase social service awareness is needed for families.**
- **Determine what supports are available and wanted in a community to help families.**
- **Planning and implementation of PSE strategies and activities should be inclusive and depend upon the rural community's assets and needs.**

Overall, practitioners and families in rural areas have important messages to share. Each participant group relayed different perspectives priorities based upon their own positionality to the rural communities. Together, these key audiences should be actively engaged in policy, systems, and environmental change work in their local community to develop meaningful solutions for family food security.

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**Appendices: Toolkit for
Policy, Systems, and
Environmental Strategies
Generated by
Participants to Support
Family Food Security in
Rural Communities**

Appendix A: Interview Recruitment Survey

Title: Policy, Systems, and Environmental Strategies to Ensure Families in Rural Communities get Enough Food

Introduction: We invite you to participate in a study Policy, Systems, Environmental Strategies to Ensure Families in Rural Communities get Enough Food. The purpose of the current study is to learn from people working and living in rural communities to develop strategies to ensure families in rural communities get enough food.

Participation: Your voluntary participation will involve taking surveys and a phone interview with a member of our team to talk about what it is like living or working in a rural community and how you get food. We expect this first survey to take about 15 minutes and the interview about one hour. The survey will ask demographic, food security, and program-related questions. The interview will ask about your experience of living or working in a rural community, strategies that could ensure families in rural communities get enough food. You will receive a \$50 gift card for your time at the end of the interview if you also complete the pre-interview survey.

Some interviewed participants will be asked to participate in an additional Delphi Panel to rank strategies with others across the United States living and working in rural communities. If you are asked and participate in a Delphi Panel, a separate \$50 gift card will be distributed.

Your decision to participate or not participate will not affect your ability to receive federal assistance, or any other services you may be receiving elsewhere. Any identifiable information (your name, email, etc.) related to your participation in this study will be kept confidential. We will collect your first and last name and all materials linking your identity to the data we collect will be kept in an electronic, password protected file. No names or identifying information about you will be included in any materials resulting from this research. The audio recording of the interview will be destroyed following transcription for analysis.

Contact for questions: If you have any questions about this research project, please contact **Dr. Carmen Byker Shanks** by phone (531-895-4037) or by email (cbshanks@centerfornutrition.org). Questions or concerns about your rights as a research participant should be directed to **Mark Quinn** irb@montana.edu.

This study is being conducted by Share Our Strength, Gretchen Swanson Center for Nutrition, and Montana State University. This work is funded by Share Our Strength.

Research subject's consent to participate in research: To voluntarily agree to take part in this study, you must sign on the line below. Your signature indicates that you have read or had read to you this entire consent form and have had all of your questions answered.

1. **We are looking for study participants who live in a rural location. Please enter the zip code where you live here.**
2. **What is your first and last name?**
3. **What is your age?**
4. **How many children under the age of 18 are in your household?**
 - a. **Number of children ages 0-5 years:**
 - b. **Number of children ages 6-17 years:**
5. **Are you employed?**
 - No, I am not currently employed, but I am looking for a job
 - No, I am not currently employed and am not looking for work
 - No, I am retired or disabled
 - No, I am a full-time homemaker/stay-at-home parent
 - No, I am a full-time student
 - Yes, I am employed year-round in a job for 1-29 hours per week
 - Yes, I am employed year-round in a job for more than 30 hours per week
 - I am a volunteer
 - Other (please specify): _____

6. How do you identify your gender?

- Woman
- Man
- Non-binary/third gender
- Prefer to self-describe: _____
- Prefer not to answer

7. How would you describe your racial and/or ethnic background? Check all that apply.

- Hispanic and Latino/a/x
- Central American
- Mexican
- Other Hispanic or Latino/a/x:

- Asian
 - Asian Indian
 - Cambodian
 - Chinese
 - Communities of Myanmar
 - Chinese
 - Filipino/a
 - Hmong
 - Japanese
 - Korean
 - Laotian
 - Vietnamese
 - Other Asian: _____
- **Black and African American**
 - African American
 - Afro-Caribbean
 - Ethiopian
 - Somali
 - Other African: _____
 - Other Black: _____
- **American Indian and Alaska Native**
 - American Indian
 - Alaska Native
 - Canadian Inuit, Metis, or First Nation
 - Indigenous Mexican, Central American, or South American

- **Middle Eastern and North African**
 - Middle Eastern
 - North African
- **Native Hawaiian and Pacific Islander**
 - Chamoru (Chamorro)
 - Marshallese
 - Community of the Micronesian Region
 - Native Hawaiian
 - Samoan
 - Other Pacific Islander: _____

- **White or European American**
 - Eastern European
 - Slavic
 - Western European
 - Other White: _____
- **Other race or ethnicity:**
- **Don't know/not sure**
- **Prefer not to answer**

8. What is the highest level of education you have completed?

- Less than a high school diploma
- High school diploma or GED
- Some college, no degree
- Associate's degree (e.g., AA, AS)
- Bachelor's degree (e.g., BA, BS)
- Master's degree or above
- Prefer not to answer

9. The food that we bought just didn't last, and we didn't have money to get more. Was that often, sometimes, or never true for your household in the last 30 days?

- Often true
- Sometimes true
- Never true
- Don't know/Prefer not to answer

10. We couldn't afford to eat balanced meals (a balanced meal fulfills all of a person's nutritional needs). Was that often, sometimes, or never true for your household in the last 30 days?

- Often true
- Sometimes true
- Never true
- Don't know

11. In the last 30 days, did you or other adults in your household ever cut the size of your meals or skip meals because there wasn't enough money for food?

- Yes
- No --> Go to Question 12

12. In the last 30 days, how many days did this happen? _____ days

13. In the last 30 days, did you ever eat less than you felt you should because there wasn't enough money for food?

- Yes
- No
- Don't know

14. In the last 30 days, were you ever hungry but didn't eat because there wasn't enough money for food?

- Yes
- No
- Don't know

15. Please indicate whether the next statement was often true, sometimes true, or never true in the last 30 days for the children living in your household who are under 18 years old.

"The children were not eating enough because we just couldn't afford enough food."

- Often true
- Sometimes true
- Never true

16. Have you or anyone in your household received or participated in any of the following food services in the past 12 months? Check all that apply:

- SNAP, Supplemental Nutrition Assistance Program
- WIC, Special Supplemental Nutrition Program for Women, Infants, and Children
- FDIPIR, Food Distribution Program on Indian Reservations
- Free or reduced-price school lunch
- Free or reduced-price school breakfast
- P-EBT, Pandemic-EBT: provides additional money to purchase food for your children on an electronic benefit card (EBT) to replace free and reduced-price meals
- Free after school meal programs
- Free meals through child care programs
- Free summer meal programs, including summer mobile meals
- Food pantries or food distribution at school
- Food banks or pantries that are not at school
- Meal on wheel programs for seniors
- Food from churches, synagogues, mosques, or other religious organizations
- Soup kitchen or shelter
- Produce RX or other fruit and vegetable voucher programs
- Other, please describe: _____

17. Have you or anyone in your household received any of the following services in the past 12 months? Check all that apply:

- Medicaid
 - o Arizona Health Care Cost Containment System
 - o STAR, State of Texas Access Reform Managed Care Program
 - o Georgia Medicare/Georgia Families
 - o KMP, Kentucky Medical Program
 - o Healthy Michigan Plan
- SCHIP, State Children's Health Insurance Program
 - o PeachCare for Kids (PCK) in Georgia
 - o MICHild in Michigan
- TANF, Temporary Assistance for Needy Families
- Unemployment benefits
- Social security

- Disability (SSDI), Social Security Disability Insurance
- SSI, Supplementary Security Income
- EITC, Earned Income Tax Credits
- Child Tax Credits
- Tax Credits
- Housing support such as ERA, Emergency Rental Assistance, LIHEAP, Low Income Home Energy Assistance Program, subsidized housing/affordable housing, transitional housing
- Child care assistance, such as child care subsidies (also called vouchers and fee assistance), Head Start and Early Head Start, State-funded pre-k, and sliding tuition fee scales
- Child welfare programs, such as federal Title IV-E foster care, adoption assistance, and kinship guardianship assistance program; the Promoting Safe and Stable Families Program; and the Chafee Foster Care Independence Program (CFCIP)
- Transportation assistance such as RTAP, Rural Transit Assistance Program, or other regional transportation assistance programs
- Other, please describe: _____

18. The assistance programs I participate in help my family pay for things that are needed to meet our basic needs of living.

- Completely disagree
- Disagree
- Neither disagree nor agree
- Agree
- Completely agree

19. Thank you for your time! We will contact you soon if you are eligible to participate in an interview. What is your preferred way you would like us to communicate to schedule your interview?

- Email
- Phone Call --> **Go to question 21**
- Text message --> **Go to question 21**

20. Please provide your *email* so we can contact you to schedule an interview, if you are eligible.

21. Please provide your *phone number* so we can contact you to schedule an interview, if you are eligible. We will only use this number to schedule your interview.

Appendix B: Practitioner Interview Guide

Introduction

Thank you for agreeing to participate in this interview. We are speaking with individuals working in rural [insert state] communities to identify strategies that ensure families in rural communities get enough food. We know that families are food secure or food insecure for many reasons. We hope that you can help us to identify reasons that apply to your rural community and some potential solutions. We want to share this research with organizations and policymakers interested in making sure families in rural areas always have access to the right amount of affordable and healthy food to feed a family.

This study is being conducted by Share Our Strength, Gretchen Swanson Center for Nutrition, and Montana State University. This work is funded by Share Our Strength.

Before we start, I want you to know that this interview is confidential. Your name will not be linked with your answers. Your answers will be combined with all the other interviews we're conducting across the state. Your participation in this interview is completely voluntary. We can stop the interview at any time. Also, your participation in this study will not affect your current or future eligibility for any assistance programs. This interview should take about 30-60 minutes; if you need to take a break, we can do so at any time. Also, there are no right or wrong answers. I would like to record our discussion today to make sure I don't miss any of your comments. Is that okay? (If the participant says "no", stop and thank them for their time but let me know they are not eligible since audio recording is necessary for this study). At the end of the interview, you will receive \$50 for compensation for your time. Please know that by participating in the interview, you are agreeing to be a part of the study.

Do you have any questions about this study?

** Start recording

Context of Rural Community

- First off, I'd like to learn a little more about what it's like to live in rural [insert state]?
 - Possible probes, only if participant is not elaborating:
 - ◇ What do you like about living here?
 - ◇ Are there any challenges you experience living in [state]?

Acquiring Resources and Food in a Rural Community

- Many families struggle to pay for things that are needed to meet their basic needs of living. How do you think living in a rural area affects the way that families pay for things to meet their basic needs?
- Specifically about food, how do you think living in a rural area affects the way families get food?
- There are many policies that are made to support households that struggle to pay for their basic needs of living. Examples are Medicaid, rental assistance, or unemployment benefits. What do people in your community think about these resources?
- Additionally, there are many policies that are designed to support households that struggle to feed their family. Examples are SNAP, WIC, and food pantries. What do people in your community think about these resources?
- I am going to read a list of programs. Please tell me which ones you are aware of by saying yes or no [read names of programs and use definitions only if asked. Note the program's that the participant is aware of].

- **Medicaid:** state and federal program that provides health care coverage to low-income families and individuals
- **The State Children's Health Insurance Program (SCHIP):** provides insurance coverage for children whose families earn too much to qualify for Medicaid, but who cannot afford private coverage
- **Early Childcare Education:** programs that assist families with early childcare education such as Head Start and Early Head Start
- **Temporary Assistance for Needy Families (TANF):** time limited program that assists families with children when the parents or other responsible relatives cannot provide for the family's basic needs. Programs may include childcare assistance, job preparation, and work assistance.
- **Rental assistance:** programs that help tenants find places to live and pay rent.
 - **Includes Emergency Rental Assistance (ERA):** which provides services to households experiencing homelessness. Services include case management, housing search and stabilization, temporary rental assistance, and housing counseling.
 - Includes affordable housing and subsidized housing.
- **Tax credits:** tax incentive which allows certain taxpayers to subtract the amount of the credit they have accrued from the total they owe the state
 - **Includes Child tax credits:** program that can reduce the Federal tax you owe by \$1,000 for each qualifying child under the age of 17. During COVID-19 and up until December, most families with children were getting monthly payments.
- **Direct cash payments, also known as stimulus checks:** direct cash payments to lower-and middle-income Americans of

\$1,200 for each adult and \$500 for each child during COVID-19.

- **Unemployment benefits:** employer and government paid program that provides temporary, partial income replacement to qualified individuals who are unemployed
- **Social Security:** provides protection against the loss of earnings due to retirement, death, or disability
- **Social Security Disability Insurance (SSDI):** pays benefits to individuals if they are “insured.” This means that they worked long enough – and recently enough - and paid Social Security taxes on your earnings.
- **Supplemental Security Income (SSI):** pays benefits to adults and children with disabilities who have limited income and resources
- **Earned Income Tax Credit (EITC):** a refundable tax credit for low- to moderate-income working individuals and couples, particularly those with children
- **Low Income Home Energy Assistance Program (LIHEAP):** assists eligible low-income households with their heating and cooling energy costs

- You said you know of [fill in]. From the list of programs you are aware of, which 3 programs are the most helpful for families to meet their basic needs? Why?
- Are any of those programs unhelpful? Why?
- Can you tell me about any other local community resources and programs that help your families in your community to meet their basic needs?
 - o Probe: school programs, church programs, local non-profits, etc
- Are there any other programs that you think could be in place to help families in your community meet their basic needs?
- Are there any other policies that you think could be in place to help families in your community meet their basic needs? For example, increasing the minimum wage.

- I am going to read a list of programs. Please tell me which ones you are aware of by saying yes or no [read names of programs and use definitions only if asked. Note the program's that the participant is aware of].

- **Supplemental Nutrition Assistance Program (SNAP):** federal program that provides an electronic benefits card (EBT) card for eligible families to buy groceries
- **Special Supplemental Nutrition Program for Women, Infants, and Children (WIC):** federal program that provides supplemental foods, health care referrals, and nutrition education for low-income pregnant, breastfeeding, and non-breastfeeding postpartum women, and to infants and children up to age five.
- **Food Distribution Program on Indian Reservations (FDPIR):** provides USDA Foods to income-eligible households living on Indian reservations or nearby areas. Households use FDPIR as an alternative to SNAP because they do not have easy access to SNAP offices or stores.
- **Charitable food system:** a network of food banks, food pantries, and meal programs that distribute free food help fill the gaps federal nutrition programs are missing.
- **Child and Adult Food Care Program (CACFP):** provides free meals and snacks to eligible children and adults at participating child care centers, day care homes, and adult day care centers.
- **After school meal programs:** programs that offer free meals and snacks to children during after school hours
- School meal programs, including:
 - o **Free or reduced price lunch or breakfast through the National School Lunch Program (NSLP) and the School Breakfast Program (SBP):** meal program providing low-cost or free lunches to children each school day

- o **Pandemic-EBT (P-EBT):** provides additional money to purchase food for your children on an electronic benefit card (EBT) to replace free and reduced-price meals
- o **Summer meal programs, including:** programs that provide funding to serve meals and snacks during the summer months when school is not in session. Includes:
 - ◇ **Summer Food Service Program (SFSP):** reimburses program operators who serve free meals and snacks to children and teens in low-income areas.
 - ◇ **Seamless Summer Option (SSO):** school districts serve meals free of charge to children ages 18 and younger from low-income areas

- You said you know of [fill in]. From the list of programs you are aware of, which 3 programs are the most helpful for families to meet their basic needs? Why?
- Are any of those programs unhelpful? Why?
- Can you tell me about any other local community resources and programs that help your families in your community to meet their basic needs?
 - o Probe: school programs, church programs, local non-profits, etc
- Are there any other programs that you think could be in place to help families in your community meet their basic needs?
- Are there any other policies that you think could be in place to help families in your community meet their basic needs? For example, increasing the minimum wage.
- I am going to read a list of programs. Please tell me which ones you are aware of by saying yes or no [read names of programs and use definitions only if asked. Note the program's that the participant is aware of].

Organizational and Community Capacity

Next, I am going to ask a few questions about your organization's capacity to support projects that help households pay for things that are needed to meet their basic needs or have the right amount of affordable and healthy food to feed a family in your local area.

- What role does your organization play in advocating for helping families meet their food and/or basic needs?
- How do you see organizations in your community or state that support families' ability to meet their food and/or basic needs coordinating with each other to increase reach and effectiveness?
- What strategies have been particularly successful to help families meet their food and/or basic needs in your community or state? To acquire food?
 - o What resources are necessary to build upon these successes?
- What has been particularly challenging?
- To what extent is there buy-in from the community and support for strategies that help families meet their food and/or basic needs? Can you provide examples? Probe: community centers (schools, workplaces, childcare centers, churches, etc)
- To what extent do you interact with people and groups who struggle with making ends meet or having enough food?

Participant Driven Strategies and Feasibility of Strategies

- You provided some ideas already. Do you have any additional programs or policies that you haven't shared which could help families to keep food on the table in your community or meet their basic needs?
- Do people in your community feel that they can advocate for better policies and programs to the government or local leaders around meeting basic needs or having enough food? Do they have the tools to speak up and feel their voices will be heard?

Stigma, Racism, Language Barriers

- In this section, I am going to ask you about stigma and other barriers that families may encounter in making ends meet.
 - Can you describe how your community's perception of assistance programs affects the success of assistance programs?
 - Have you noticed that certain communities are treated differently in your town than others? If yes, tell me which communities and how they are treated differently?
 - Are there language barriers to reaching people who need support to feed their family? Is anything done to overcome these barriers?
 - Are there cultural barriers to reaching people who need support to feed their family? If yes, tell me about the cultural barriers.

Conclusion: Those are all the questions I have today. Is there anything else you'd like to share that we haven't discussed? Thank you for your time and participation.

You will receive a \$50 electronic gift card for your time spent participating. Can you confirm your email for me so I am able to send you that gift card? Thanks again for your time!

Appendix C: Family Interview Guide

Introduction:

Thank you for agreeing to participate in this interview. We are speaking with individuals living in rural [insert state] to identify strategies that ensure families in rural communities get enough to eat. We know that families are food secure or food insecure for many reasons. We hope that you can help us to identify reasons that apply to your rural community and some possible solutions. We want to share this research with organizations and policymakers interested in making sure families in rural areas always have access to the right amount of affordable and healthy food to feed a family.

This study is being conducted by Share Our Strength, Gretchen Swanson Center for Nutrition, and Montana State University. This work is funded by Share Our Strength.

Before we start, I want you to know that this interview is confidential. Your name will not be linked with your answers. Your answers will be combined with all the other interviews we're conducting across the state. Your participation in this interview is completely voluntary. We can stop the interview at any time. Also, your participation in this study will not affect your current or future eligibility for any assistance programs.

This interview should take about 30 to 60 minutes; if you need to take a break, we can do so at any time. Also, there are no right or wrong answers. I would like to record our discussion today to make sure I don't miss any of your comments. Is that okay? (If the participant says "no", stop and thank them for their time but let me know they are not eligible since audio recording is necessary for this study). At the end of the interview, you will receive \$50 for compensation for your time. Please know that by participating in the interview, you are agreeing to be a part of the study.

Do you have any questions about the study or the information sheet you received before we begin?

**** Start recording**

Context of Rural Community

- First off, I'd like to learn a little more about your community. How would you describe what it's like to live in rural [insert state]?
 - Possible probes, only if participant is not elaborating:
 - ◊ What do you like about living here?
 - ◊ Are there any challenges you experience living in [county]?

Acquiring Resources and Food in a Rural Community

- Many families struggle to pay for things that are needed to meet our basic needs of living. How do you think living in a rural area affects the way that families meet our basic needs?
- Specifically about food, how do you think living in a rural area affects the families get food?
- There are many programs that are made to support households that struggle meet our basic needs. Examples are Medicaid, rental assistance, or unemployment benefits. What do people in your community think about these resources?

- Additionally, there are many programs that are designed to support households that struggle to feed their families. Examples are SNAP, WIC, and food pantries. What do people in your community think about these resources?
- How far is the nearest grocery store from where you live? How far do you have to travel for food?
 - Does the grocery store have the foods you need?
- I am going to read a list of programs. Please tell me which ones you are aware of by saying yes or no [read names of programs and use definitions only if asked. Note the program's that the participant is aware of].

- **Medicaid:** state and federal program that provides health care to low-income families and individuals
- **The State Children's Health Insurance Program (SCHIP):** provides insurance for children whose families earn too much to qualify for Medicaid, but who cannot afford private insurance
- **Early Childcare Education:** programs that assist families in with early childcare education such as Head Start or Early Head Start.
- **Temporary Assistance for Needy Families (TANF):** time limited program that assists families with children when the parents or other responsible relatives cannot provide for the family's basic needs. Programs may include childcare assistance, job preparation, and work assistance.
- **Rental assistance:** programs that help tenants find places to live and pay rent
 - **Includes Emergency Rental Assistance (ERA):** which provides services to households experiencing homelessness. Services include case management, housing search and stabilization, temporary rental assistance, and housing counseling.
 - Includes affordable housing and subsidized housing.

- **Tax credits:** tax incentive which allows certain taxpayers to subtract the amount of the credit they have collected from the total they owe the state
 - **Includes Child tax credits:** program that can reduce the federal tax you owe by \$1,000 for each qualifying child under the age of 17. During COVID-19 and up until December, most families with children were getting monthly payments.
- **Direct cash payments, also known as stimulus checks:** direct cash payments to lower-and middle-income Americans of \$1,200 for each adult and \$500 for each child during COVID-19.
- **Unemployment benefits:** employer and government paid program that provides temporary, partial income replacement to qualified individuals who are unemployed
- **Social Security:** provides protection against the loss of earnings due to retirement, death, or disability
- **Social Security Disability Insurance (SSDI):** pays benefits to individuals if they are "insured." This means that they worked long enough, and recently enough, and have paid Social Security taxes on your earnings.
- **Supplemental Security Income (SSI):** pays benefits to adults and children with disabilities who have limited income and resources
- **Earned Income Tax Credit (EITC):** a refundable tax credit for low- to moderate-income working households, particularly those with children
- **Low Income Home Energy Assistance Program (LIHEAP):** assists eligible low-income households with their heating and cooling energy costs

- You said you know of [fill in]. From the list of programs you are aware of, which 3 programs are the most helpful for families to meet our basic? Why?
- Are any of those programs unhelpful? Why?
- Can you tell me about any other local community resources and programs that help your families in your community meet our basic needs?
 - Probe: school programs, church programs, local non-profits, etc
- Are there any other programs that you think could be in place to help families in your community meet our basic needs?
- Are there any other policies that you think could be in place to help families in your community meet their basic needs? For example, increasing the minimum wage.
- I am going to read a list of programs. Please tell me which ones you are aware of by saying yes or no [read names of programs and use definitions only if asked. Note the program's that the participant is aware of].

- **Supplemental Nutrition Assistance Program (SNAP):** federal program that provides an electronic benefits card (EBT) card for eligible families to buy groceries
- **Special Supplemental Nutrition Program for Women, Infants, and Children (WIC):** federal program that provides supplemental foods, health care referrals, and nutrition education for low-income pregnant, breastfeeding, and non-breastfeeding postpartum women, and to infants and children up to age five.
- **Free groceries or meals** from a food pantry, foodbank, church, or other place that helps with free food.
- **Food Distribution Program on Indian Reservations (FDPIR):** provides food to income-eligible households living on Indian reservations or nearby areas. Households use FDPIR as an alternative to SNAP because they do not have easy access to SNAP offices or stores.

- **Child and Adult Food Care Program (CACFP):** provides free meals and snacks to eligible children and adults who at participating child care centers, day care homes, and adult day care centers.
- **After school meal programs:** programs that offer free meals and snacks to children during after school hours
- **School meal programs, including:**
 - **Free or reduced price lunch or breakfast at schools** through the National School Lunch Program (NSLP) and the School Breakfast Program (SBP): meal program providing low-cost or free lunches to children each school day
 - **Pandemic-EBT (P-EBT):** provides additional money to purchase food for your children on an electronic benefits card (EBT) to replace free and reduced-price meals.
 - **Summer meal programs:** programs that provide free meals and snacks during the summer months when school is not in session.

- It is wonderful that you know of some resources in your community. There still are some resources it sounds like you have not heard of, would you like us to help connect you with someone in Texas to help learn about these services? We can always talk more at the end of the interview, but we are happy to help connect anyone who wants to learn more with one of our partners! No worries if you are not interested in being connected.
- You said you know of [fill in]. From the list of programs you are aware of, which 3 programs are the most helpful in making sure families with children in your community have enough food. Why?

- Are any of those programs unhelpful? Why?
- Can you tell me about any other local community resources and programs that help families with children in your community have enough to eat?
 - Probe: school programs, church programs, local non profits, etc
- Are there any other programs that you think could be in place to help families in your community have enough food?
- Are there any other policies that you think could be in place to help families with children in your community have enough food? For example, allowing all children to be eligible for free school lunch.
- Some programs provide payments that are used only for specific purposes (such as food benefits on an EBT card or employment training), while others provide payments that families are able to use on whatever they feel is needed. Which do you think is more helpful for families to pay for things that are needed to meet our basic needs of living or put food on the table?

Household Experience

- What is your household's experience with the programs we discussed, like [use survey responses]?
- How do the programs you have participated in meeting your basic needs?
- How could these programs better support you?
- Are there programs you know about but haven't participated in? Which programs? Why have you or anyone in your family not participated?
- What types of programs do you prefer? Do you prefer participating in local community programs such as church programs or local non-profits such as food pantries or in federal programs like SNAP or WIC?
 - Can you explain why?
 - What type of programs (community versus government) do you find most helpful for your family?

Participant Driven Strategies and Feasibility of Strategies

- You provided some ideas already. Do you have any additional programs that you haven't shared which could help families to keep food on the table in your community or meet their basic needs?
- Do people in your community feel like they could make changes in policies if they wanted to?
 - would they know where to go/who to talk to?
 - Do you think they would have the tools they need to speak up and feel their voices will be heard?

Stigma, Racism, Language Barriers

- In this section, I am going to ask you about barriers that families may encounter in making ends meet. Including how others in your community feel about programs and resources designed to provide basic needs.
 - Can you explain any existing barriers that your family experiences with participation in assistance programs?
 - Can you describe how people in your community feel about assistance programs?
 - Have you been treated with less respect than other people by program staff, grocery store staff, or people in your community when using these programs or applying for these programs? If so, can you tell me about this experience?
 - Have you experienced any language barriers when asking questions about assistance programs? If so, can you tell me about this experience?
 - Are you able to find the foods you want in your local stores? Do the programs you participate in help you get access to the food you want to feed your family?

Conclusion: A final question is how did you find out about the interview today? Those are all the questions I have today. Is there anything else you'd like to share that we haven't discussed?

You will receive a \$50 electronic gift card for your time spent participating. Can you confirm your email for me so I am able to send you that gift card? Thanks again for your time!

We are currently still recruiting people to participate in this interview. If you do know of anyone who would be interested in participating, please let us know we would love to work with them. If you have their email address or phone number, we are happy to reach out to them, if not, I can give you our information and would love it if you gave it to people you think would be interested in participating. Thanks again for your time!

Appendix D: Representative Quotes from Practitioner and Family Interviews

Theme- PSE strategies	Subtheme- Activities	Practitioner Quotes
A: Make people more aware of services like SNAP, WIC, food banks, low-cost childcare, housing assistance, Medicaid, TANF, disability assistance, and other programs	Advertising for these programs in creative ways such as through social media	"We have to have face to face interaction. You can't really just put out an email blast and everybody get it...and then you can also use your social media outlets in the town, like a Facebook page, if they have it and are already connected, but still everybody's not in that loop. You still have to bring it to people on the ground, like go door to door, maybe put a door mailer out or something into the mailboxes." [Georgia practitioner]
	Advertising these programs in many locations in the community	"I sometimes go back to church communities, because I have to ask myself, where do people gather, and so schools are one place. I use school sometimes to get information back to parents, because that's just the only place that I know I have 400 kids coming, and they can take something home to a parent." [Georgia practitioner]
	Local community members sharing how to sign up and use these programs	"Having a one stop shop if you need rental assistance, you can go to a website that will tell you, the agencies that will help you. If you need utility service, instead of calling 211, maybe have another one stop shop for people, because a lot of times they have to call around." [Texas practitioner]
	Organizations employing bi-lingual staff members to tell people about programs	"We started a resource center and a food pantry in [a school], because 51% of our population at that school is Hispanic. We hired bilingual... she's helped people get bank accounts, she goes to the bank, she goes to doctor's appointments with them, sometimes she meets with employers and employees who can't communicate with each other." [Kentucky practitioner]

Theme- PSE strategies	Subtheme- Activities	Practitioner Quotes
B: Make it easier to sign-up for programs like SNAP, WIC, food banks, low-cost childcare, housing assistance, Medicaid, TANF, disability assistance, and other programs	Making sure there are local offices in rural communities where people can go to sign up for these programs	"I've had issues where [the social service] doesn't get any of my documents that I'm sending in. I work with people at the health department who will fax or mail in my documents... and they say they don't get them." [Michigan family participant speaking English]
	Make program applications shorter	"Some of the paperwork needs to be condensed, the process needs to be a little bit easier. I can understand the process, because we don't want people taking advantage but because of that it's hurting those that really could use it, and they will say well, that that's too much information that they're asking for me, just to give me \$15 of food stamps." [Georgia practitioner]
	Allow people to fill out one application that can be used for all of these programs	"I'd love to see policies that streamline the application process for all of this, I'd love to see a policy push that would streamline it, modernize the application process, and where it becomes just a one stop shop where folks don't have to go to a million different places to qualify for different things." [Arizona practitioner]
C: Make it trouble-free for people to use programs like SNAP, WIC, food banks, low-cost childcare, housing assistance, Medicaid, TANF, disability assistance, and other programs	Make it faster to start using these programs	"Where families are waiting for an application to be filled or whatever, it's that short term stuff that I think in our community people struggle with, until they get housing assistance set up, or until they get approved for TANF and SNAP and all." [Georgia practitioner]
	Change program rules for how people can use money or services	"One thing that needs to be made are stricter rules to see who is actually using the program correctly." [Arizona family participant speaking English]
	Allow people to receive program services on the phone, video, or computer	"[We've used] WIC and that was really helpful and pretty easy to do. It was easy to apply and easy to keep up with because during the [recertification] call [during COVID] it was pretty much phone interviews, just checking in." [Arizona family participant speaking English]
	Make it easier to check out at grocery stores when using SNAP and WIC	"WIC is really hard to use. I have WIC. They do have an app where you can scan barcodes and luckily, I do have a smartphone. It still seems like you run into problems. I went to visit my mom, and I couldn't buy anything that I've bought [at home]. It wasn't in their system. So, we went to another grocery store, which was like a little hometown owned one. I grabbed the whole milk that I usually grab...they sent me back to get the cheaper whole milk and I said "I always buy this brand." They said "you have to get the cheaper one." I've also ended up buying things with money because it's like a process [to check out with WIC]." [Kentucky family participant speaking English]
	Make it easier to keep using and stay on these programs	"...When you're going to have a renewal and you have to speak to somebody on the phone. My renewals are always on the phone with SNAP and you have to speak to a caseworker, that's not polite, they don't work with you. They're just rude." [Texas family participant speaking English]

Theme- PSE strategies	Subtheme- Activities	Practitioner Quotes
C: Make it trouble-free for people to use programs like SNAP, WIC, food banks, low-cost childcare, housing assistance, Medicaid, TANF, disability assistance, and other programs	Make it easier for immigrants to use these programs	"The main barrier is having documents because there are many people without documents....If you come to a food benefits program and are told to show an ID to register, and if you don't have a document, then you can't register you." [Georgia family participant speaking Spanish]
	Follow-up with families that are receiving programs	"The P-EBT and the Summer Food Program for students are really helpful. The communications to parents are jumbled... Sometimes parents receive it they call DHHS...So there's always miscommunication with that program." [Michigan practitioner]
D: Provide chances for people to suggest changes to programs like SNAP, WIC, food banks, affordable childcare programs, housing assistance, Medicaid, TANF, disability assistance, and other programs	Offer ways for people to share their ideas for changes to policies	"We have a referral process to make sure everyone knows where to go and who to call and then utilizing that call chain to make sure families have an easy time accessing it." [Michigan practitioner]
	Advocate for an increase in the amount of money that programs can give people	"A lot of people that I've talked to, whenever they qualify for food stamps. It's really hard whenever you get to their income limit, because I'm not even at their income limit. Even though I'm not at their income limit, they only give me \$266 a month. That's not enough to feed me and my kids on top of our bills. So I have to go out and do extra work on top of having a full time job just to be able to feed my kids." [Kentucky family participant speaking English]
	Create more programs that help families after WIC ends when kids turn six years old	"Kids go through WIC, and then after WIC they go to kindergarten. Then they're going through the school meal system, that's kind of the gap they fill." [Arizona practitioner]
E. Expand food banks	Open food banks for more hours	"... there's no food pantry that is open every week. [There is] a thrift store that keeps in the emergency food bag behind the counter in case somebody needs some food. They're only allowed to pick up that bag once a month. There's no place that has like a daily open, and there's no place that has hot food." [Michigan practitioner]
	Let people choose the foods they get at the food bank	"[The food bank that let's me choose the food is] much more geared towards kids, and especially like families. It was just like fine dining compared to the pre box stuff that sits there with no AC and nothing. [The food pantry I go to] has everything in coolers and freezers and is neatly packaged up, expiration dates are checked." [Texas family participant speaking English]
	Provide more foods that give people from various cultures a "taste of home"	"In the community [I live in], we have different Food Banks that also help the Hispanic community and low-income communities." [Georgia family participant speaking Spanish]
	Provide more foods that are good for food allergies or special diets like low sodium	"For me with my gluten intolerance [food pantries are hard], because they do a lot of pasta and stuff, there are no gluten free options. With my husband being diabetic, he's not supposed to eat the pasta, they're not the most nutritious meals offered. That's for those that have dietary restrictions." [Arizona family participant speaking English]

Theme- PSE strategies	Subtheme- Activities	Practitioner Quotes
E. Expand food banks	Increase funding for food banks	[Food pantries are] absolutely not able to keep up with the demand. The reason I say this is because currently there is a church that's right [by where I work]. On the date, they call it the giveaway day, the traffic is backed up so far. They actually have people out there directing this traffic. To think that all of those people are in that bad need, you know it's bad...they do it once a week." [Kentucky practitioner]
	Create food banks inside existing community spaces like churches, schools, health care clinics	"We've actually started our mobile school pantries. They are at a common location or at a school and families come and some are they're basically drive thru. Last month, we actually had extra protein like frozen meat for them and they let them pick out their own protein, we put it out on a table. families got to take about almost 20 pounds of protein." [Georgia practitioner]
	Build food banks in places that are easier to get to	"A lot started doing mobile markets or mobile distributions, where they will actually take food into a community. Kind of like a grocery store on wheels, so it has fresh and frozen food, that people can actually go into the vehicle and pick out what they need for their family." [Texas practitioner]
	Provide more foods that are appealing	"Food pantries of course help to an extent, but it always depends on what you get in the box. Of course, things that the kids are allergic to or we're allergic to we missed out on. Or some of the stuff we get is starting to mold are starting to rot." [Arizona family participant speaking English]
F: Expand school nutrition programs	Serve more food during meals at school	"My daughter stopped eating lunches at school. They have a lot of food in the beginning and then as the line gets slower, they run out. In the end, it's only like peanut butter or ham sandwiches left... if you happen to get lunch at the latest time, you will usually only end up with a cold lunch or something that my child won't eat peanut butter. I'm already allergic to it, and she just doesn't like it. I don't think it's fair that kids who have a later recess or lunch break, get stuck with a meal that part because they didn't plan well enough." [Arizona family participant speaking English]
	Provide free school lunch for all students	"The reduced lunch is helpful as well because most parents can't afford to bring snacks for their kids to school. To me, when they can get [school lunch] free or when they can get it reduced to a certain amount. It'd be better for them." [Texas family participant speaking English]
	Provide more places for school-age children to get meals	"[Having] reduced regulations on some of the meal programs [would be helpful]. Having non congregate feeding for the meal programs was very beneficial. That kept us from having to find places and were centralized, to let the most kids come out and eat and enjoy the meals." [Kentucky practitioner]

Theme- PSE strategies	Subtheme- Activities	Practitioner Quotes
F: Expand school nutrition programs	Provide more school foods that give people from various cultures a “taste of home”	“A few years ago in our schools down here, we had traditional, tight tamales wrapped in corn husks. I got a few calls from parents about “why are you trying to feed my kid”? “Why would you expect my child to eat this corn husk”? They weren't supposed to eat that part that's it's wrapped in that that would be like the paper that you would take out off of a burrito or something, you don't eat the wrapper, you just eat the tortilla. What if you have never been exposed to that? You don't know... That's so great about where I live we try so hard to have a diverse menu.” [Arizona practitioner]
	Give leftover foods to students or food banks	“I was shocked at the Federal Food mandates, at least when I was a principal, were that when there was food leftover at the lunch program. You couldn't send it home with kids, which was heartbreaking. So there's just a lot of breaks in the system that needs to be worked out.” [Michigan practitioner]
	Make nutrition standards easier	“Reduced regulations on the school meal programs...now that we're back on the National School Lunch Program sodium guidelines and some of the other meal pattern guidelines during a time when it's extremely difficult to even get all the items that you need. It makes it even harder to meet those meal pattern regulations. Continued relaxation on some of those guidelines would have been very helpful.” [Kentucky practitioner]
	Create more summer free-food programs for school-age children	“We always thought it would be neat if there was a way to do a community program during the summer to help offset that for a community like a household meal drive, where we do something prior to the holidays where we can bag groceries for a household and issue it out the last day of school and get that to them to help supplement them. We utilized our No Kid Hungry grant to do some work like that but we were only eligible to operate that grant one time. To be able to sustain something like that, it would be neat.” [Texas practitioner]
	Provide after school programs	“As far as the after school feeding program, it's important to make sure our children are provided with three healthy meals a day and snacks in between. Sometimes children don't have food to come home to so that's really important to make sure that they have the nutrition that they need.” [Kentucky family participant speaking English]

Theme- PSE strategies	Subtheme- Activities	Practitioner Quotes
F: Expand school nutrition programs	Provide more school supply drives	"[A] Church offers everything children need for school supplies to start the year. The only thing that parents have to worry about buying is the backpack." [Georgia family speaking Spanish]
	Create more backpack programs that send kids home with food	"Our church does a backpack buddies program, and they help kids get school supplies and clothes...Once a month they have a food distribution program. So kids that are less fortunate can go..." [Michigan family participant speaking English]
	Teach nutrition and food skills to students at school	"The school nutrition programs are a great opportunity to educate families. I was a local director for 18 years. It's that opportunity to teach kids how to make good choices, how to really impact their health, for the future. Through modeling that Farm to School is a huge part of that, in that kids learn where their food comes from, they learn how to even grow it, prepare it, feel value in like trying new foods, not being afraid to eat a variety of foods. That is a tremendous value of our program." [Georgia practitioner]
G: Provide more places to get food locally	Start community gardens	"A lot of programs throughout the state are starting to invest in some of these community garden spaces and offer the guidance and time for managing the garden. Also harvesting vegetables and helping get those shared out in the community." [Georgia practitioner]
	Let people donate meat from hunting to food banks	"Meat Processing is really difficult up in the [upper P eninsula, MI]. There's only one USDA [processing plant] if you want to sell it in the grocery store or sell it in a restaurant. If you want to sell it piece by piece at the Farmer's Market it's got to be USDA processed. That's a barrier for folks who don't have a personal relationship with a farmer or a meat processor... venison is also hard to get and it's something that's very plentiful up here...once you're able to have the privilege and the money to shoot your own and get a tag and get it processed [that's helpful]." [Michigan practitioner]
	Provide discounts at farmer's markets	"In Kentucky right now at the farmer's markets, you get like two for one. If you have food stamps, and you go buy \$20 worth of food stamps to use at the farmer's market, they'll give you \$40 worth of actual credit that you can use to spend on any of the homemade breads or the produce or the fruits and vegetables." [Kentucky practitioner]

Theme- PSE strategies	Subtheme- Activities	Practitioner Quotes
G: Provide more places to get food locally	Make the food at farmer's markets less expensive	"There is not much supply of the local products. We have to eat what reaches the markets... For example, apples and pears are grown here, and we understand that when food is exported from other places the price is higher..." [Georgia family participant speaking Spanish]
	Create mobile farmer's markets	"I did use POW (produce on wheels without waste) for the last four or four and a half years." [Arizona practitioner]
	Provide prescriptions for fruits and vegetables at health care clinics	"I do have [a produce prescription program] through my child's doctor. It's every Thursday from nine to two and you go in there and if you want food, all you have to have is a little voucher. They give you a voucher and then you just go in there and pick whatever foods you need and then that's it." [Texas family participant speaking English]
	Work with food banks to offer fresh local foods	"We need to invest in the infrastructure of our local producers in order to meet the demands that are coming and are going to continue coming...if we can support local producers and growing, and utilize programs, like food access programs, to make that food more affordable for local families, and then also support, like on farm infrastructures, such as processing and aggregation, then we can start to see some movement and also keeping that money in our local communities versus shipping it out." [Michigan practitioner]
H: Provide options for people to learn about buying and making healthy foods on a budget	Provide classes and resources in multiple languages	"If they have young kids like school aged kids in Elementary they are good about getting out information. Older kids and even when you don't have any kids and elderly people don't what's out there. They don't know the resources. There's also the fact of resources not being in their native language. There's a whole bunch of Hispanic families here and it's not just people from Mexico, we have people from Guatemala. You have to have all these different dialects from their home countries and not everybody knows those different dialects." [Georgia practitioner]
	Provide food skills classes online (website, Facebook, Instagram, YouTube)	"They were also trying to launch some more opportunities over zoom. We have nutrition classes that our state office holds. Those are something they're hoping to keep for the long term..." [Arizona practitioner]
	Provide cooking classes	"[Our state extension service] has a cooking program, where they teach you how to cook and that could be accessed more in our communities, because we just assume people know how to cook." [Michigan practitioner]

Theme- PSE strategies	Subtheme- Activities	Practitioner Quotes
H: Provide options for people to learn about buying and making healthy foods on a budget	Provide finance classes (budgeting, saving)	"There could be more financial classes or how to get out of debt or being able to budget a little bit more. Not every family is a two income family like they said one of the the goals is to save up to \$1,000." [Georgia family participant speaking English]
	Provide food safety and preservation classes (canning foods, freezing foods)	"We do a lot of food preservation and food safety programming. We're doing a lot of canning classes and canning programming and then we house the National Center for Home Food Preservation here at UGA. We answer a lot of questions and do a lot of programming in that work." [Georgia practitioner]
I: Make childcare options and early childhood education better fit the needs of families with a low income	Provide bookmobiles and mobile libraries	"There's the bookmobile, which is really cool. It usually stops only at some of the subsidized housing complexes and it doesn't come around to some of the other neighborhoods. I would say they're really cool programs, but I wish they could be expanded some." [Kentucky practitioner]
	Provide free preschool	"We run a preschool here this year and it's free. They have 30 kids in their program, and they feed them breakfast and lunch also. That probably does help the families with childcare at least for a little bit for the day." [Arizona practitioner]
	Open more childcare locations	"We have zero childcare, only one in our whole county. That can be a major barrier between families being able to work and not being able to work. It's been happening for years so that is number one priority for me would be to have something in place especially for kids, the younger that you can get them into programs, where they begin to work with them educationally, the better it's going to be for them in the long run." [Kentucky family participant speaking English]
	Open childcare facilities for more hours	"Offering... a 24 hour childcare [would be helpful] if a mom can only get a job in the evening, and she's got three kids at home... they have places where you can get reduced childcare..." [Texas practitioner]
J: Expand employment	Increase the minimum wage	"With the cost of living right now and then what rent is and with inflation they have got to move how much they're paying people up, because no one can afford to live here or anywhere." [Michigan family participant speaking English]

Theme- PSE strategies	Subtheme- Activities	Practitioner Quotes
J: Expand employment	Create more job opportunities	“Implementing more work [would be helpful], because there are very few jobs here and the jobs that there are, they pay very little. They pay very low, at \$8 or \$7 [per hour]; how do you survive on a salary like that per week?” [Georgia family participant speaking Spanish]
	Provide people with more help when searching and applying for a job	“Living in a rural area, there’s less job opportunities. Most of the time, your biggest job opportunities are the school education system itself. Or perhaps the courthouse, like the established community. Our top employers tend to be the one grocery chain, the school district, and maybe the courthouse, which are limited job opportunities.” [Texas practitioner]
K: Increase access to affordable health care	Provide more health care options that cost less	“Migrants, in particular, it can be a lot of expense to have a medical emergency and not have insurance. There was a time when we had tried to get medical insurance, but it didn’t cover 100%, despite paying a significant amount that I consider to be expensive for medical insurance that doesn’t meet people’s needs.” [Texas family participant speaking Spanish]
	Provide mobile medical vans	“There’s a medical provider here that has three mobile medical vans, and they’re going out to the rural communities and providing services for low income families, undocumented families or families with access to our health care system. That’s very helpful to be able to have the medical providers go to where the people are.” [Arizona practitioner]
	Provide more options for affordable mental health services	“The mental health first responders are able to respond to some situations instead of armed law enforcement, which is a huge difference....many of the cases that we deal with are not a legal issue. It’s a mental health issue and so you got to have the right people respond.” [Arizona practitioner]

Theme- PSE strategies	Subtheme- Activities	Practitioner Quotes
L: Make housing more affordable	Provide help for paying for gas, electric, water, and other utilities	“Anything that can help relieve families from the cost of the bills that we have [would be helpful], like anything that would have to do with how much we’re paying toward electric how much we’re paying for our natural gas. People get so frustrated when they open up their electric bills, and they see all these new fees tagged on month after month after month and there they will show the usage comparison from 12 months, and a lot of people have not changed their usage, but their bill has just skyrocketed.” [Kentucky family participant speaking English]
	Create limits on how much a family must pay for gas, electric, water, and other utilities	“There’s a warning attached to LIHEAP it’s two to three times a year and it helps with either heating and/or water assistance. I help my clients get that a lot of times when they come in, but I think a lot of them have started to rely on it. The electrical companies can raise the rates as much as they want, because they know no matter what somebody’s going to pay for it.” [Kentucky practitioner]
	Build more places to live that cost less	"I personally live in government assisted housing... without that housing, I'd be up a tree because there's three complexes, but there's always a list. So let's say I moved and I needed it again, I have to wait at the bottom of the list." [Texas family participant speaking English]
M: Make it easier to get from place to place	Lower gas prices	“Most families in rural areas have to drive further and with the gas prices, most of our money goes towards gas versus groceries. With all the prices going up on groceries and everything, it’s hard to restrict your money.” [Arizona family participant speaking English]
	Provide free public transportation	"Living in a rural area, you don't have access to transportation. Sometimes families ask for rides to the store, and they may or may not be available at the time that they need it. No excess bus lines." [Georgia practitioner]

Appendix E: Delphi Survey

Title: Selecting strategies to ensure families with children in rural areas have enough food

Introduction: We invite you to participate in a study called Policy, Systems, and Environmental Strategies to ensure families in rural areas get enough food. The purpose of the study is to learn from people working and living in rural communities to develop strategies that ensure families in rural areas get enough food.

Participation: Your voluntary participation will involve taking a survey and you will have the option to participate in an online discussion group. We expect this first survey to take about 30 minutes and the discussion group about one hour. The survey will ask questions about rating strategies for ensuring families with children in rural areas get enough food. The discussion groups will be scheduled in May or June. Those who complete this survey as the first step, will be invited for the discussion groups at a later date. The discussion groups will include about 6 people. You will receive a \$25 electronic gift card for your time after you complete the survey. If you participate in the discussion group, you will receive an additional \$50 electronic gift card.

Your decision to participate or not participate will not affect your ability to receive federal assistance, or any other services you may be receiving elsewhere. Any identifiable information (your name, email, etc.) related to your participation in this study will be kept confidential. We will collect your first and last name and all materials linking your identity to the data we collect will be kept in an electronic, password protected file. No names or identifying information about you will be included in any materials resulting from this research. The audio recording of the interview will be destroyed following transcription for analysis.

Contact for Questions:

If you have any questions about this research project, please contact Dr. Carmen Byker Shanks by phone or by email
531-895-4037
cbshanks@centerfornutrition.org

This study is being conducted by Share Our Strength and Gretchen Swanson Center for Nutrition. This work is funded by Share Our Strength.

Active consent buttons: Yes/No

Instructions: What is your first and last name?

What state are you located in? [AZ, GA, KY, MI, TX]

The first part of the survey asks you to read about 13 strategies to ensure families with children in your community get enough food and rate them. One strategy will be shown per page. **As you rate each, think about how relevant each strategy is to ending hunger in your community specifically.**

1. One strategy to ensure families in your community get enough food is to **make people more aware** of services like SNAP, WIC, food banks, low-cost childcare, housing assistance, Medicaid, TANF, disability assistance, and other programs.

Examples of how to do this include: Advertising for these programs in creative ways such as through social media; advertising these programs in many locations in the community; local community members sharing how to sign up and use these programs; organizations employing bi-lingual staff members to tell people about programs.

Please rank your level of agreement or disagreement to the following statements:

I like this strategy.

[Completely disagree, disagree, neither agree nor disagree, agree, completely agree]

My community would think this strategy is a good match.

[Completely disagree, disagree, neither agree nor disagree, agree, completely agree]

This strategy seems possible to do in my community.

[Completely disagree, disagree, neither agree nor disagree, agree, completely agree]

2. One strategy ensure families in my community get enough food is to **make it easier to sign-up** for programs like SNAP, WIC, food banks, low-cost childcare, housing assistance, Medicaid, TANF, disability assistance, and other programs.

Examples of how to do this include: Making sure there are local offices in rural communities where people can go to sign up for these programs; make program applications shorter; allow people to fill out one application that can be used for all of these programs.

Please rank your level of agreement or disagreement to the following statements:

I like this strategy.

[Completely disagree, disagree, neither agree nor disagree, agree, completely agree]

My community would think this strategy is a good match.

[Completely disagree, disagree, neither agree nor disagree, agree, completely agree]

This strategy seems possible to do in my community.

[Completely disagree, disagree, neither agree nor disagree, agree, completely agree]

3. One strategy to ensure families in my community get enough food is to **make it trouble-free for people to use the programs that they've signed up for**, like SNAP, WIC, food banks, low-cost childcare, housing assistance, Medicaid, TANF, disability assistance, and other programs.

Examples of how to do this include: Making sure there are local offices in rural communities where people can go to sign up for these programs; make program applications shorter; allow people to fill out one application that can be used for all of these programs.

Please rank your level of agreement or disagreement to the following statements:

I like this strategy.

[Completely disagree, disagree, neither agree nor disagree, agree, completely agree]

My community would think this strategy is a good match.

[Completely disagree, disagree, neither agree nor disagree, agree, completely agree]

This strategy seems possible to do in my community.

[Completely disagree, disagree, neither agree nor disagree, agree, completely agree]

4. One strategy to ensure families in my community get enough food is to **provide opportunities for people to suggest changes** to programs like SNAP, WIC, food banks, affordable childcare programs, housing assistance, Medicaid, TANF, disability assistance, and other programs.

Examples of how to do this include: Offer ways for people to share their ideas for changes to policies; advocate for an increase in the amount of money that programs can give people; create more programs that help families after WIC ends when kids turn six years old.

Please rank your level of agreement or disagreement to the following statements:

I like this strategy.

[Completely disagree, disagree, neither agree nor disagree, agree, completely agree]

My community would think this strategy is a good match.

[Completely disagree, disagree, neither agree nor disagree, agree, completely agree]

This strategy seems possible to do in my community.

[Completely disagree, disagree, neither agree nor disagree, agree, completely agree]

5. One strategy to ensure families in my community get enough food is to **expand food banks**.

Examples of how to do this include: Open food banks for more hours; let people choose the foods they get at the food bank; provide more foods that give people from various cultures a “taste of home”; provide more foods that are good for food allergies or special diets like low sodium; increase

funding for food banks; create food banks inside existing community spaces like churches, schools, health care clinics; build food banks in places that are easier to get to; provide more foods that are appealing.

Please rank your level of agreement or disagreement to the following statements:

I like this strategy.

[Completely disagree, disagree, neither agree nor disagree, agree, completely agree]

My community would think this strategy is a good match.

[Completely disagree, disagree, neither agree nor disagree, agree, completely agree]

This strategy seems possible to do in my community.

[Completely disagree, disagree, neither agree nor disagree, agree, completely agree]

6. One strategy to ensure families in my community get enough food is to **expand school nutrition programs**.

Examples of how to do this include: Serve more food during meals at school; provide free school lunch for all students; provide more places for school-age children to get meals; provide more school foods that give people from various cultures a “taste of home”; give leftover foods to students or food banks; make nutrition standards easier; create more summer free-food programs for school-age children; provide after school programs; provide more school supply drives; create more backpack programs that send kids home with food; teach nutrition and food skills to students at school.

Please rank your level of agreement or disagreement to the following statements:

I like this strategy.

[Completely disagree, disagree, neither agree nor disagree, agree, completely agree]

My community would think this strategy is a good match.

[Completely disagree, disagree, neither agree nor disagree, agree, completely agree]

This strategy seems possible to do in my community.

[Completely disagree, disagree, neither agree nor disagree, agree, completely agree]

7. One strategy to ensure families in my community get enough food is to **provide more places to get food locally**.

Examples of how to do this include: Start community gardens; let people donate meat from hunting to food banks; provide discounts at farmer’s markets; make the food at farmer’s markets less expensive; create mobile farmer’s markets; provide prescriptions for fruits and vegetables at health care clinics; work with food banks to offer fresh local foods.

Please rank your level of agreement or disagreement to the following statements:

I like this strategy.

[Completely disagree, disagree, neither agree nor disagree, agree, completely agree]

My community would think this strategy is a good match.

[Completely disagree, disagree, neither agree nor disagree, agree, completely agree]

This strategy seems possible to do in my community.

[Completely disagree, disagree, neither agree nor disagree, agree, completely agree]

8. One strategy to ensure families in my community get enough food is to **provide options for people to learn about buying and making healthy foods on a budget**.

Examples of how to do this include: Provide classes and resources in multiple languages; provide food skills classes online (website, Facebook, Instagram, YouTube); provide cooking classes; provide finance classes (budgeting, saving); provide food preservation classes (canning foods, freezing foods); provide food safety classes.

Please rank your level of agreement or disagreement to the following statements:

I like this strategy.

[Completely disagree, disagree, neither agree nor disagree, agree, completely agree]

My community would think this strategy is a good match.

[Completely disagree, disagree, neither agree nor disagree, agree, completely agree]

This strategy seems possible to do in my community.

[Completely disagree, disagree, neither agree nor disagree, agree, completely agree]

9. One strategy to ensure families in my community get enough food is to make **childcare options and early childhood education** better fit the needs of families with a low income.

Examples of how to do this include: Provide bookmobiles and mobile libraries; provide free preschool; open more childcare locations; open childcare facilities for more hours.

Please rank your level of agreement or disagreement to the following statements:

I like this strategy.

[Completely disagree, disagree, neither agree nor disagree, agree, completely agree]

My community would think this strategy is a good match.

[Completely disagree, disagree, neither agree nor disagree, agree, completely agree]

This strategy seems possible to do in my community.

[Completely disagree, disagree, neither agree nor disagree, agree, completely agree]

10. One strategy to ensure families in my community get enough food is to **expand employment**.

Examples of how to do this include: Increase the minimum wage; create more job opportunities; provide people with more help when searching and applying for a job

Please rank your level of agreement or disagreement to the following statements:

I like this strategy.

[Completely disagree, disagree, neither agree nor disagree, agree, completely agree]

My community would think this strategy is a good match.

[Completely disagree, disagree, neither agree nor disagree, agree, completely agree]

This strategy seems possible to do in my community.

[Completely disagree, disagree, neither agree nor disagree, agree, completely agree]

11. One strategy to ensure families in my community get enough food is to increase access to **affordable health care**.

Examples of how to do this include: Provide more health care options that cost less; provide mobile medical vans; provide more options for affordable mental health services.

Please rank your level of agreement or disagreement to the following statements:

I like this strategy.

[Completely disagree, disagree, neither agree nor disagree, agree, completely agree]

My community would think this strategy is a good match.

[Completely disagree, disagree, neither agree nor disagree, agree, completely agree]

This strategy seems possible to do in my community.

[Completely disagree, disagree, neither agree nor disagree, agree, completely agree]

12. One strategy to ensure families in my community get enough food is to **make housing more affordable**.

Examples of how to do this include: Provide help for paying for gas, electric, water, and other utilities; create limits on how much a family must pay for gas, electric, water, and other utilities; build more places to live that cost less.

Please rank your level of agreement or disagreement to the following statements:

I like this strategy.

[Completely disagree, disagree, neither agree nor disagree, agree, completely agree]

My community would think this strategy is a good match.

[Completely disagree, disagree, neither agree nor disagree, agree, completely agree]

This strategy seems possible to do in my community.

[Completely disagree, disagree, neither agree nor disagree, agree, completely agree]

13. One strategy to ensure families in my community get enough food is to make it easier to **get from place to place.**

Examples of how to do this include: Lower gas prices; provide free public transportation.

Please rank your level of agreement or disagreement to the following statements:

I like this strategy.

[Completely disagree, disagree, neither agree nor disagree, agree, completely agree]

My community would think this strategy is a good match.

[Completely disagree, disagree, neither agree nor disagree, agree, completely agree]

This strategy seems possible to do in my community.

[Completely disagree, disagree, neither agree nor disagree, agree, completely agree]

This next section of the survey asks you to select which strategies to ensure families in your community get enough food will work the best **within different time periods**: in the short term (within the next 2 years), medium term (during the next 2 to 5 years), or long term (more than 5 years from now).

14. Please select the top three strategies that will ensure families in your community get enough food **within the next 2 years.**

- Make people **more aware** of services like SNAP, WIC, food banks, low-cost childcare, housing assistance, Medicaid, TANF, disability assistance, and other programs.
- Make it **easier to sign-up** for programs like SNAP, WIC, food banks, low-cost childcare, housing assistance, Medicaid, TANF, disability assistance, and other programs.
- Make it **trouble-free for people to use programs** like SNAP, WIC, food banks, low-cost childcare, housing assistance, Medicaid, TANF, disability assistance, and other programs.
- Provide **chances for people to suggest changes to programs** like SNAP, WIC, food banks, affordable childcare programs, housing assistance, Medicaid, TANF, disability assistance, and other programs.
- **Expand food banks**
- **Expand school nutrition programs**
- Provide more places to **get food locally.**
- Provide options for people to **learn about buying and making healthy foods** on a budget.
- Make **childcare options** and **early childhood education** better fit the needs of families with a low income.
- **Expand employment**
- Increase access to affordable **health care.**
- Make **housing** more affordable
- Make it easier to **get from place to place.**

15. Please select the top three strategies that will ensure families in your community get enough food

2 to 5 years from now.

- Make people **more aware** of services like SNAP, WIC, food banks, low-cost childcare, housing assistance, Medicaid, TANF, disability assistance, and other programs.
- Make it **easier to sign-up** for programs like SNAP, WIC, food banks, low-cost childcare, housing assistance, Medicaid, TANF, disability assistance, and other programs.
- Make it **trouble-free for people to use programs** like SNAP, WIC, food banks, low-cost childcare, housing assistance, Medicaid, TANF, disability assistance, and other programs.

- Provide **chances for people to suggest changes to programs** like SNAP, WIC, food banks, affordable childcare programs, housing assistance, Medicaid, TANF, disability assistance, and other programs.
- **Expand food banks**
- **Expand school nutrition programs**
- Provide more places to **get food locally**.
- Provide options for people to **learn about buying and making healthy foods** on a budget.
- Make **childcare options** and **early childhood education** better fit the needs of families with a low income.
- **Expand employment**
- Increase access to affordable **health care**.
- Make **housing** more affordable
- Make it easier to **get from place to place**.

16. Please select the top three strategies that will ensure families in your community get enough food **more than 5 years from now**.

- Make people **more aware** of services like SNAP, WIC, food banks, low-cost childcare, housing assistance, Medicaid, TANF, disability assistance, and other programs.
- Make it **easier to sign-up** for programs like SNAP, WIC, food banks, low-cost childcare, housing assistance, Medicaid, TANF, disability assistance, and other programs.
- Make it **trouble-free for people to use programs** like SNAP, WIC, food banks, low-cost childcare, housing assistance, Medicaid, TANF, disability assistance, and other programs.
- Provide **chances for people to suggest changes to programs** like SNAP, WIC, food banks, affordable childcare programs, housing assistance, Medicaid, TANF, disability assistance, and other programs.
- **Expand food banks**
- **Expand school nutrition programs**
- Provide more places to **get food locally**.
- Provide options for people to **learn about buying and making healthy foods** on a budget.
- Make **childcare options** and **early childhood education** better fit the needs of families with a low income.
- **Expand employment**

- Increase access to affordable **health care**.
- Make **housing** more affordable
- Make it easier to **get from place to place**.

17. After seeing the list of strategies, please add **any other missing strategies** which would ensure families with children in your community get enough food.

18. Please describe how your answers would change if rated them in the short-, medium-, and long-term.

Thank you for taking this survey.

You will be emailed your electronic gift card within the next 3 business days.

Appendix F: Semi-Structured Focus Group Guide

Introduction

Hi everyone, I'm _____ and I work at the Gretchen Swanson Center for Nutrition. Today's discussion group is in partnership with Share Our Strength.

First of all, thank you for agreeing to participate in this focus group. As an introduction to this project, we conducted 72 interviews with practitioners and families working or living in rural areas of the U.S., specifically in AZ, GA, KY, MI, and TX, to ask about ensuring families in rural communities get enough food. We derived the list of strategies you saw on the survey from the conducted interviews. Today, we will be having a more in-depth discussion about the strategies ranked highly among this group. Ultimately, today's discussion will fuel Share Our Strength's future work in rural communities.

This focus group is confidential. Your name will not be linked with your answers. Your participation in this focus group is completely voluntary. Also, your participation in this study will not affect your current or future eligibility for any assistance programs. This focus group will take about 90 minutes. There are no right or wrong answers to the questions, we want to hear your opinions. It is okay to disagree with someone else, we want to hear all opinions. Please be respectful of everyone's thoughts in this group.

A few suggestions to make the focus group run smoothly. We recommend turning on your camera, if possible, to help with the flow of the conversation. We want to hear from each of you, and this will help us see if someone is trying to talk and is accidentally on mute. To avoid background noise disruptions, we do ask if you are not talking, to keep yourself on mute. You are welcome to enter items in the chat, although please know we may be slower to respond to those comments. We ask that only one person speaks at a time so the whole conversation is captured in the recording.

As a reminder, after the completion of the focus group, we will email a \$50 gift card within the next 3 business days.

Today's discussion will be recorded. Are there any questions before we get started?

INTRODUCTION SECTION

In one sentence: What is unique about getting food in rural communities?

As you may recall, you completed a survey last month where you ranked strategies that you according to acceptability, appropriateness, and feasibility to ensure people in rural communities get enough to eat. Acceptability is the likability of the strategies in rural communities. Appropriateness is whether the strategies are a good match for rural communities. Feasibility is how possible the strategies are in rural communities. We will be sharing and discussing the survey results.

ALL STRATEGIES SECTION

Here are the number of participants who completely agreed or agreed about the acceptability, feasibility, and appropriateness of each strategy in rural communities. Overall, there was high agreement across strategies.

On this slide, you can see how the strategies are ranked from highest to lowest combined acceptability, feasibility, and appropriateness when we weighted the level of agreement with the strategies. For example, Strategy #1 was ranked the most acceptable, feasible, and appropriate for ensuring people in rural communities have enough food. On the other hand, Strategy #13 was the lowest.

Tell me what you think about the ranking of these strategies

Probe: Why do you agree or disagree with the current ranking?

Here is how all groups ranked the strategies according to acceptability, appropriateness, and feasibility.

What stands out to you?

TOP 3 STRATEGIES SECTION

Now we will focus on the top 3 ranked strategies. Let's talk more about [#1 ranked strategy]. These are the activities that help meet [#1 ranked strategy]. Why do you like or dislike them?

Probe: Which 2 activities would be the most helpful?

Probe: Which activities are less helpful?

Probe: Are there any activities that are missing that would further [#1 ranked strategy]?

Let's talk more about [#2 ranked strategy]. These are the activities that help meet [#2 ranked strategy]. Why do you like or dislike them?

Probe: Which 2 activities would be the most helpful?

Probe: Which activities are less helpful?

Probe: Are there any activities that are missing that would further [#2 ranked strategy]?

Let's talk more about [#3 ranked strategy]. These are the activities that help meet [#3 ranked strategy].

Why do you like or dislike them?

Probe: Which 2 activities would be the most helpful?

Probe: Which activities are less helpful?

Probe: Are there any activities that are missing that would further [#3 ranked strategy]?

TIMELINE OF TOP STRATEGIES SECTION

As you may recall, we asked everyone to rank the top 3 strategies to accomplish within the next 2 years, within the next 2-5 years, and more than 5 years. Here are the strategies your group ranked to address over time. For example, Strategy #1 was a high priority and ranked the most, while Strategy #13 was the lowest priority.

Why do you think these are ranked how they are?

Probe: If you had to pick 1 to start with, which one would you pick?

Here is how all participant groups ranked the strategies according to time priorities.

What stands out to you?

WRAP UP

Anything else relevant to today's conversation that we would like to discuss?

Now I would like to briefly summarize the ideas we discussed today and I will ask for your feedback at the end. Is there anything else that I have missed?

Thank you for sharing your insights today. We will be sharing the final project results at the end of August. We will be emailing you a \$50 electronic gift card as a thank you for your participation today.

Appendix G: Detailed Delphi Survey Results

Family Participants Speaking English

Table 15. Scores for the Delphi survey among family participants speaking English

Strategy	# of responses	Ranking constructs	Neither agree nor disagree n	Completely disagree n	Disagree n	Agree n	Completely agree n	Average score†	Percent score‡ %
Strategy A	18	Acceptability	0	1	0	6	11	3.5	88%
	18	Appropriateness	1	0	1	5	11	3.39	85%
	18	Feasibility	0	0	0	7	11	3.61	90%
	54	Overall*	1	1	1	18	33	3.50	88%
Strategy B	18	Acceptability	0	0	0	6	12	3.67	92%
	18	Appropriateness	1	0	0	7	10	3.39	85%
	18	Feasibility	1	0	0	6	11	3.44	86%
	54	Overall*	2	0	0	19	33	3.50	88%

Strategy	# of responses	Ranking constructs	Neither agree nor disagree n	Completely disagree n	Disagree n	Agree n	Completely agree n	Average score†	Percent score‡ %
Strategy C	18	Acceptability	3	0	0	7	8	2.94	74%
	18	Appropriateness	3	0	0	8	7	2.89	72%
	18	Feasibility	3	0	0	5	10	3.06	76%
	54	Overall*	9	0	0	20	25	2.96	74%
Strategy D	18	Acceptability	2	0	0	6	10	3.22	81%
	18	Appropriateness	3	0	0	5	10	3.06	76%
	18	Feasibility	1	0	0	7	10	3.39	85%
	54	Overall*	6	0	0	18	30	3.22	81%
Strategy E	18	Acceptability	1	1	0	5	11	3.33	83%
	18	Appropriateness	1	1	0	5	11	3.33	83%
	18	Feasibility	3	1	0	6	8	2.83	71%
	54	Overall*	5	3	0	16	30	3.16	79%
Strategy F	18	Acceptability	2	0	0	5	11	3.28	82%
	18	Appropriateness	2	0	0	5	11	3.28	82%
	18	Feasibility	3	0	0	5	10	3.06	76%
	54	Overall*	7	0	0	15	32	3.21	80%
Strategy G	18	Acceptability	2	0	0	4	12	3.33	83%
	18	Appropriateness	2	0	0	4	12	3.33	83%
	18	Feasibility	4	0	0	5	9	2.83	71%
	54	Overall*	8	0	0	13	33	3.16	79%

Strategy	# of responses	Ranking constructs	Neither agree nor disagree	Completely disagree	Disagree	Agree	Completely agree	Average score†	Percent score‡ %
Strategy H	18	Acceptability	2	0	0	4	12	3.33	83%
	18	Appropriateness	2	0	0	5	11	3.28	82%
	18	Feasibility	3	0	0	4	11	3.11	78%
	54	Overall*	7	0	0	13	34	3.24	81%
Strategy I	18	Acceptability	1	0	0	6	11	3.44	86%
	18	Appropriateness	2	0	0	5	11	3.28	82%
	18	Feasibility	2	0	1	4	11	3.22	81%
	54	Overall*	5	0	1	15	33	3.31	83%
Strategy J	18	Acceptability	0	1	1	5	11	3.44	86%
	18	Appropriateness	0	1	0	6	11	3.50	88%
	18	Feasibility	1	1	1	6	9	3.17	79%
	54	Overall*	1	3	2	17	31	3.37	84%
Strategy K	18	Acceptability	1	0	0	5	12	3.50	88%
	18	Appropriateness	2	0	0	6	10	3.22	81%
	18	Feasibility	5	0	1	5	7	2.50	63%
	54	Overall*	8	0	1	16	29	3.07	77%
Strategy L	18	Acceptability	0	0	1	5	12	3.61	90%
	18	Appropriateness	1	1	1	6	9	3.17	79%
	18	Feasibility	2	2	2	4	8	2.78	69%
	54	Overall*	3	3	4	15	29	3.19	80%

Strategy	# of responses	Ranking constructs	Neither agree nor disagree n	Completely disagree n	Disagree n	Agree n	Completely agree n	Average score†	Percent score‡ %
Strategy M	18	Acceptability	1	0	0	4	13	3.56	89%
	18	Appropriateness	1	0	0	7	10	3.39	85%
	18	Feasibility	2	0	3	3	10	3.06	76%
	54	Overall*	4	0	3	14	33	3.34	83%

* The overall category combines the responses of acceptability, appropriateness, and feasibility.

† Each participant's response was assigned the scale value, summed with all participant's responses, and divided by the total number of responses. Here, acceptability, appropriateness, and/or feasibility were divided into levels of support: low (0.00-2.00), moderate (2.1-2.68), high (2.70-3.40), and very high (3.41-4.00).

‡ Each participant's response was assigned a value, summed with all participant's weighted response, and divided by the total possible weighted value of all participants' responses. Overall acceptability, appropriateness, and feasibility was divided into levels of support: low ($\leq 50\%$), moderate (51-67%), high (68-84%), and very high ($\geq 85\%$).

Family Participants Speaking Spanish

Table 16. Scores for the Delphi survey among family participants speaking Spanish

Strategy	# of responses	Ranking constructs	Neither agree nor disagree n	Completely disagree n	Disagree n	Agree n	Completely agree n	Average score†	Percent score‡ %
Strategy A	7	Acceptability	1	1	0	3	3	2.75	69%
	7	Appropriateness	0	0	0	4	2	3.33	83%
	7	Feasibility	0	0	0	3	4	3.57	89%
	21	Overall*	1	1	0	10	9	3.22	80%
Strategy B	8	Acceptability	0	0	0	4	4	3.50	88%
	8	Appropriateness	0	0	0	4	4	3.50	88%
	8	Feasibility	0	0	0	4	4	3.50	88%
	24	Overall*	0	0	0	12	12	3.50	88%

Strategy	# of responses	Ranking constructs	Neither agree nor disagree n	Completely disagree n	Disagree n	Agree n	Completely agree n	Average score†	Percent score‡ %
Strategy C	8	Acceptability	0	0	0	2	6	3.75	94%
	8	Appropriateness	0	0	0	1	7	3.88	97%
	8	Feasibility	0	0	0	3	5	3.63	91%
	24	Overall*	0	0	0	6	18	3.75	94%
Strategy D	8	Acceptability	1	0	0	2	5	3.25	81%
	8	Appropriateness	1	0	0	2	5	3.25	81%
	8	Feasibility	1	0	0	3	4	3.13	78%
	24	Overall*	3	0	0	7	14	3.21	80%
Strategy E	8	Acceptability	0	1	0	2	5	3.38	84%
	8	Appropriateness	0	0	0	2	6	3.75	94%
	8	Feasibility	0	0	0	3	5	3.63	91%
	24	Overall*	0	1	0	7	16	3.59	90%
Strategy F	8	Acceptability	1	0	0	2	5	3.25	81%
	8	Appropriateness	2	0	0	3	3	2.63	66%
	8	Feasibility	1	0	1	3	3	2.88	72%
	24	Overall*	4	0	1	8	11	2.92	73%
Strategy G	8	Acceptability	1	0	0	2	5	3.25	81%
	8	Appropriateness	0	0	1	2	5	3.50	88%
	8	Feasibility	0	0	1	2	5	3.50	88%
	24	Overall*	1	0	2	6	15	3.42	85%

Strategy	# of responses	Ranking constructs	Neither agree nor disagree n	Completely disagree n	Disagree n	Agree n	Completely agree n	Average score†	Percent score‡ %
Strategy H	8	Acceptability	0	0	0	3	5	3.63	91%
	8	Appropriateness	1	0	0	2	5	3.25	81%
	8	Feasibility	0	0	1	2	5	3.50	88%
	24	Overall*	1	0	1	7	15	3.46	86%
Strategy I	8	Acceptability	0	0	0	1	7	3.88	97%
	8	Appropriateness	1	0	0	1	6	3.38	84%
	8	Feasibility	1	0	0	2	5	3.25	81%
	24	Overall*	2	0	0	4	18	3.50	88%
Strategy J	8	Acceptability	0	0	0	1	7	3.83	97%
	8	Appropriateness	1	0	0	2	5	3.25	81%
	8	Feasibility	1	0	0	1	6	3.38	84%
	24	Overall*	2	0	0	4	18	3.49	88%
Strategy K	8	Acceptability	0	0	0	2	6	3.75	94%
	8	Appropriateness	0	1	0	2	5	3.38	84%
	8	Feasibility	0	1	0	4	3	3.13	78%
	24	Overall*	0	2	0	8	14	3.42	85%
Strategy L	8	Acceptability	0	0	0	3	5	3.63	91%
	8	Appropriateness	1	0	0	2	5	3.25	81%
	8	Feasibility	1	0	0	3	4	3.13	78%
	24	Overall*	2	0	0	8	14	3.34	83%

Strategy	# of responses	Ranking constructs	Neither agree nor disagree n	Completely disagree n	Disagree n	Agree n	Completely agree n	Average score†	Percent score‡ %
Strategy M	8	Acceptability	0	0	0	0	8	4.00	100%
	8	Appropriateness	0	0	0	2	6	3.75	94%
	8	Feasibility	0	0	0	3	5	3.63	91%
	24	Overall*	0	0	0	5	19	3.79	95%

* The overall category combines the responses of acceptability, appropriateness, and feasibility.

† Each participant's response was assigned the scale value, summed with all participant's responses, and divided by the total number of responses. Here, acceptability, appropriateness, and/or feasibility were divided into levels of support: low (0.00-2.00), moderate (2.1-2.68), high (2.70-3.40), and very high (3.41-4.00).

‡ Each participant's response was assigned a value, summed with all participant's weighted response, and divided by the total possible weighted value of all participants' responses. Overall acceptability, appropriateness, and feasibility was divided into levels of support: low ($\leq 50\%$), moderate (51-67%), high (68-84%), and very high ($\geq 85\%$).

Practitioners

Table 17. Scores for the Delphi survey among practitioners

Strategy	# of responses	Ranking constructs	Neither agree nor disagree n	Completely disagree n	Disagree n	Agree n	Completely agree n	Average score†	Percent score‡ %
Strategy A	12	Acceptability	0	0	0	5	7	3.58	90%
	12	Appropriateness	1	0	0	4	7	3.33	83%
	12	Feasibility	0	0	0	4	8	3.67	92%
	36	Overall*	1	0	0	13	22	3.53	88%
Strategy B	12	Acceptability	0	0	0	0	12	4.00	100%
	12	Appropriateness	0	0	0	1	11	3.92	98%
	12	Feasibility	1	0	0	2	9	3.50	88%
	36	Overall*	1	0	0	3	32	3.81	95%

Strategy	# of responses	Ranking constructs	Neither agree nor disagree n	Completely disagree n	Disagree n	Agree n	Completely agree n	Average score†	Percent score‡ %
Strategy C	12	Acceptability	1	0	1	2	8	3.33	83%
	12	Appropriateness	1	0	1	3	7	3.25	81%
	12	Feasibility	3	0	1	2	6	2.67	67%
	36	Overall*	5	0	3	7	21	3.08	77%
Strategy D	12	Acceptability	3	0	0	2	7	2.83	71%
	12	Appropriateness	2	0	0	5	5	2.92	73%
	12	Feasibility	3	0	1	4	4	2.50	63%
	36	Overall*	8	0	1	11	16	2.75	69%
Strategy E	12	Acceptability	1	0	0	5	6	3.25	81%
	12	Appropriateness	1	0	0	5	6	3.25	81%
	12	Feasibility	2	0	2	1	7	2.92	73%
	36	Overall*	4	0	2	11	19	3.14	78%
Strategy F	12	Acceptability	2	0	1	2	7	3.00	75%
	12	Appropriateness	2	0	1	3	6	2.92	73%
	12	Feasibility	3	1	1	1	6	2.50	63%
	36	Overall*	7	1	3	6	19	2.81	70%
Strategy G	12	Acceptability	1	0	0	6	5	3.17	79%
	12	Appropriateness	2	0	0	5	5	2.92	73%
	12	Feasibility	2	0	1	6	3	2.67	67%
	36	Overall*	5	0	1	17	13	2.92	73%

Strategy	# of responses	Ranking constructs	Neither agree nor disagree n	Completely disagree n	Disagree n	Agree n	Completely agree n	Average score†	Percent score‡ %
Strategy H	12	Acceptability	2	0	1	3	6	2.92	73%
	12	Appropriateness	3	0	0	4	5	2.67	67%
	12	Feasibility	4	0	2	1	5	2.25	56%
	36	Overall*	9	0	3	8	16	2.61	65%
Strategy I	12	Acceptability	2	0	1	2	7	3.00	75%
	12	Appropriateness	2	0	2	3	5	2.75	69%
	12	Feasibility	2	0	4	1	5	2.58	65%
	36	Overall*	6	0	7	6	17	2.78	69%
Strategy J	12	Acceptability	1	0	1	3	7	3.25	81%
	12	Appropriateness	5	0	1	2	4	2.00	50%
	12	Feasibility	4	0	3	1	4	2.08	52%
	36	Overall*	10	0	5	6	15	2.33	61%
Strategy K	12	Acceptability	2	0	0	4	6	3.00	75%
	12	Appropriateness	5	0	0	2	5	2.17	54%
	12	Feasibility	4	0	1	4	3	2.17	54%
	36	Overall*	11	0	1	10	14	2.45	61%
Strategy L	12	Acceptability	3	0	1	2	6	2.67	67%
	12	Appropriateness	4	0	1	3	4	2.25	56%
	12	Feasibility	4	1	1	2	4	2.08	52%
	36	Overall*	11	1	3	7	14	2.33	58%

Strategy	# of responses	Ranking constructs	Neither agree nor disagree n	Completely disagree n	Disagree n	Agree n	Completely agree n	Average score†	Percent score‡ %
Strategy M	12	Acceptability	1	0	1	5	5	3.08	77%
	12	Appropriateness	2	0	2	3	5	2.75	69%
	12	Feasibility	2	0	5	1	4	2.42	60%
	36	Overall*	5	0	8	9	14	2.75	69%

* The overall category combines the responses of acceptability, appropriateness, and feasibility.

† Each participant's response was assigned the scale value, summed with all participant's responses, and divided by the total number of responses. Here, acceptability, appropriateness, and/or feasibility were divided into levels of support: low (0.00-2.00), moderate (2.1-2.68), high (2.70-3.40), and very high (3.41-4.00).

‡ Each participant's response was assigned a value, summed with all participant's weighted response, and divided by the total possible weighted value of all participants' responses. Overall acceptability, appropriateness, and feasibility was divided into levels of support: low (≤50%), moderate (51-67%), high (68-84%), and very high (≥85%).

Share Our Strength Staff

Table 18. Scores for the Delphi survey among Share Our Strength staff

Strategy	# of responses	Ranking constructs	Neither agree nor disagree n	Completely disagree n	Disagree n	Agree n	Completely agree n	Average score†	Percent score‡ %
Strategy A	8	Acceptability	0	0	0	5	3	3.38	84%
	8	Appropriateness	2	0	0	3	3	2.63	66%
	8	Feasibility	0	0	0	4	4	3.50	88%
	24	Overall*	2	0	0	14	10	3.17	79%
Strategy B	8	Acceptability	0	0	0	0	8	4.00	100%
	8	Appropriateness	0	0	0	1	7	3.88	97%
	8	Feasibility	1	0	1	1	5	3.13	78%
	24	Overall*	1	0	1	2	20	3.67	92%

Strategy	# of responses	Ranking constructs	Neither agree nor disagree n	Completely disagree n	Disagree n	Agree n	Completely agree n	Average score†	Percent score‡ %
Strategy C	8	Acceptability	0	0	0	2	6	3.75	94%
	8	Appropriateness	0	0	0	2	6	3.75	94%
	8	Feasibility	2	0	1	1	4	2.63	66%
	24	Overall*	2	0	1	5	16	3.38	84%
Strategy D	8	Acceptability	2	0	0	2	4	2.75	69%
	8	Appropriateness	3	0	0	1	4	2.38	59%
	8	Feasibility	2	0	2	3	1	2.13	53%
	24	Overall*	7	0	2	6	9	2.42	60%
Strategy E	8	Acceptability	1	2	0	2	3	2.50	63%
	8	Appropriateness	4	0	0	1	3	1.88	47%
	8	Feasibility	4	0	1	1	2	1.63	41%
	24	Overall*	9	2	1	4	8	2.00	50%
Strategy F	8	Acceptability	0	0	0	1	7	3.88	97%
	8	Appropriateness	0	0	0	1	7	3.88	97%
	8	Feasibility	1	0	0	2	5	3.25	81%
	24	Overall*	1	0	0	4	19	3.67	92%
Strategy G	8	Acceptability	2	1	0	2	3	2.38	59%
	8	Appropriateness	3	0	1	1	3	2.13	53%
	8	Feasibility	2	0	2	1	3	2.38	59%
	24	Overall*	7	1	3	4	9	2.30	57%

Strategy	# of responses	Ranking constructs	Neither agree nor disagree n	Completely disagree n	Disagree n	Agree n	Completely agree n	Average score†	Percent score‡ %
Strategy H	8	Acceptability	3	1	1	1	2	1.75	44%
	8	Appropriateness	4	0	1	2	1	1.50	38%
	8	Feasibility	5	0	0	2	1	1.25	31%
	24	Overall*	12	1	2	5	4	1.50	38%
Strategy I	8	Acceptability	0	1	1	2	4	3.13	78%
	8	Appropriateness	2	1	0	1	4	2.50	63%
	8	Feasibility	2	1	1	1	3	2.25	56%
	24	Overall*	4	3	2	4	11	2.63	66%
Strategy J	8	Acceptability	0	0	0	2	6	3.75	94%
	8	Appropriateness	1	0	0	2	5	3.25	81%
	8	Feasibility	2	0	2	1	3	2.38	59%
	24	Overall*	3	0	2	5	14	3.13	78%
Strategy K	8	Acceptability	0	0	1	0	7	3.75	94%
	8	Appropriateness	2	0	0	1	5	2.88	72%
	8	Feasibility	4	0	0	0	4	2.00	53%
	24	Overall*	6	0	1	1	16	2.88	73%
Strategy L	8	Acceptability	0	0	0	2	6	3.75	94%
	8	Appropriateness	2	0	0	1	5	2.88	72%
	8	Feasibility	3	0	1	1	3	2.13	53%
	24	Overall*	5	0	1	4	14	2.92	73%

Strategy	# of responses	Ranking constructs	Neither agree nor disagree n	Completely disagree n	Disagree n	Agree n	Completely agree n	Average score†	Percent score‡
Strategy M	8	Acceptability	1	0	0	1	6	3.38	84%
	8	Appropriateness	2	0	0	2	4	2.75	69%
	8	Feasibility	4	0	0	2	2	1.75	44%
	24	Overall*	7	0	0	5	12	2.63	66%

* The overall category combines the responses of acceptability, appropriateness, and feasibility.

† Each participant's response was assigned the scale value, summed with all participant's responses, and divided by the total number of responses. Here, acceptability, appropriateness, and/or feasibility were divided into levels of support: low (0.00-2.00), moderate (2.1-2.68), high (2.70-3.40), and very high (3.41-4.00).

‡ Each participant's response was assigned a value, summed with all participant's weighted response, and divided by the total possible weighted value of all participants' responses. Overall acceptability, appropriateness, and feasibility was divided into levels of support: low ($\leq 50\%$), moderate (51-67%), high (68-84%), and very high ($\geq 85\%$).