

**Healthy Food and Beverage Sales
In Recreation Facilities and Local Government Buildings**

Phase III & IV Evaluation Report

October 2010



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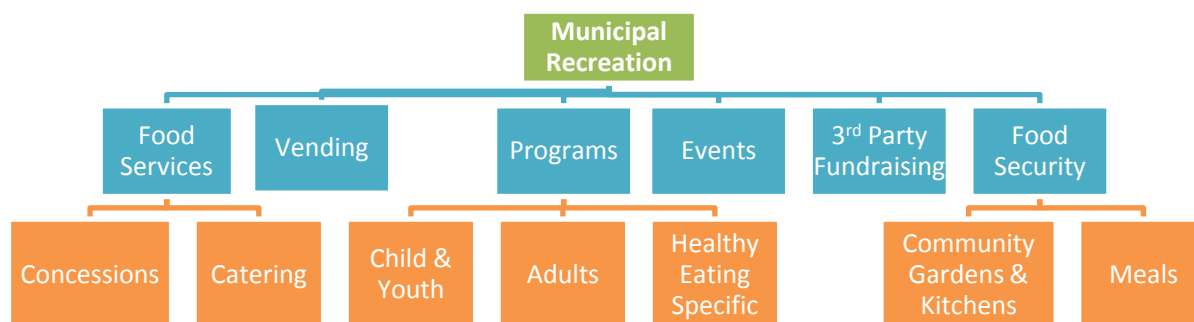
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Introduction & Background

The BC Healthy Eating Strategy was developed and formally adopted by the BC Healthy Living Alliance (BCHLA) in May 2007 as one of four targeted approaches to health promotion in the province. Within the Strategy were four initiatives targeted at increasing the availability of healthy food choices, consumption of healthy choices, and skills related to making healthy choices in environments where families live, learn, work and play. This report documents the community-level findings of the third and fourth grant phase of the Healthy Food and Beverage Sales in Recreation Facilities and Local Government Buildings (HFBS) initiative. Prior to the implementation of the BCHLA strategy a provincial needs assessment explored the current food environment in British Columbia recreation facilities; it found that municipal recreation facilities across the province had eating environments that were not ‘health promoting’ and in fact appeared ‘obesogenic’¹. The needs assessment also showed that recreation stakeholders were interested in improving this situation and so with funding from the Childhood Obesity Foundation of BC and the Ministry of Healthy Living and Sport, they developed and piloted a toolkit to mobilize and support action at the community level. This toolkit was called the Municipal Recreation Food Environment Action Toolkit (MRFEAT). The toolkit outlined multiple settings within recreation where healthy food options could be either provided or promoted (including but not limited to food and beverage sales) and provided samples and resources to facilitate positive changes. Figure 1.2 summarizes the primary operational areas where food policy and programs have an impact within recreation facilities and where change can be addressed. This framework provided an outline for project implementation and evaluation.

Figure i: Operational areas within recreation where food policy and programs may have an impact



The HFBS initiative adopted and adapted the tool kit and the broader food environment model from MRFEAT to facilitate change in municipal recreation facilities. The HFBS initiative was entrusted to the British Columbia Recreation and Parks Association (BCRPA) and the Union of British Columbia Municipalities (UBCM) to lead. The project aimed to: a) build organizational and community capacity for action, b) provide support to local government buildings and recreational facilities to encourage the voluntarily adoption of the healthy food and beverages guidelines for public buildings ² and c) encourage the provision or promotion of healthy options in all areas of recreation operations (e.g. children’s programs and events).

¹ ‘Obesogenic’ environments are places where “the influences, surroundings, opportunities, or conditions of life promote obesity in individuals or populations.” Swinburn B, Egger G. Preventive strategies against weight gain and obesity. *Obesity Reviews* 2002;3(4):289–301

² British Columbia Recreation and Parks Association website, “Healthy Food and Beverage Sales”, <http://www.bcrpa.bc.ca/HealthyFoodandBeverageSales.htm>, 2008

There have been four grant phases of the initiative:

- **Phase I** piloted the revised MRFEAT toolkit with 9 communities.
- **Phase II** rolled out the HFBS initiative with 17 communities and an evaluation report was finalized for the BCHLA in February 2009. In addition, 5 First Nation communities participated and completed a tailored evaluation.
- **Phase III** provided grants to 5 additional communities who participated between spring 2009 and spring 2010.
- **Phase IV** provided grants to 6 communities and 2010

The community-level findings from the evaluation completed in the recreation facilities impacted by the project in the third and fourth grant phases comprise this report.

Phase III-IV Participating Communities and Facilities:

Phase III

1. Municipality of North Cowichan	<ul style="list-style-type: none"> • Fuller Lake Arena • Cowichan Aquatic Centre
2. North Vancouver	<ul style="list-style-type: none"> • Harry Jerome Recreation Centre
3. Regional District of Nanaimo	<ul style="list-style-type: none"> • Oceanside Place • Ravensong Aquatic Centre
4. Terrace	<ul style="list-style-type: none"> • Sportsplex • Aquatic Centre
5. District of Houston	<ul style="list-style-type: none"> • Houston Leisure Facility • Claude Parish Arena

Phase IV

6. Burns Lake	<ul style="list-style-type: none"> • Tom Forsyth Memorial Arena • Burns Lake Curling Club
7. Cowichan Valley Regional District	<ul style="list-style-type: none"> • Cowichan Lake Recreation Centre
8. District of Kent	<ul style="list-style-type: none"> • Ferny Coombe Pool • Fitness/Activity Centre
9. District of West Vancouver	<ul style="list-style-type: none"> • West Vancouver Community Centre
10. Revelstoke	<ul style="list-style-type: none"> • Revelstoke Community Centre • Revelstoke Aquatic Centre • Revelstoke Forum Arena
11. Trail	<ul style="list-style-type: none"> • Trail Aquatic and Leisure Centre

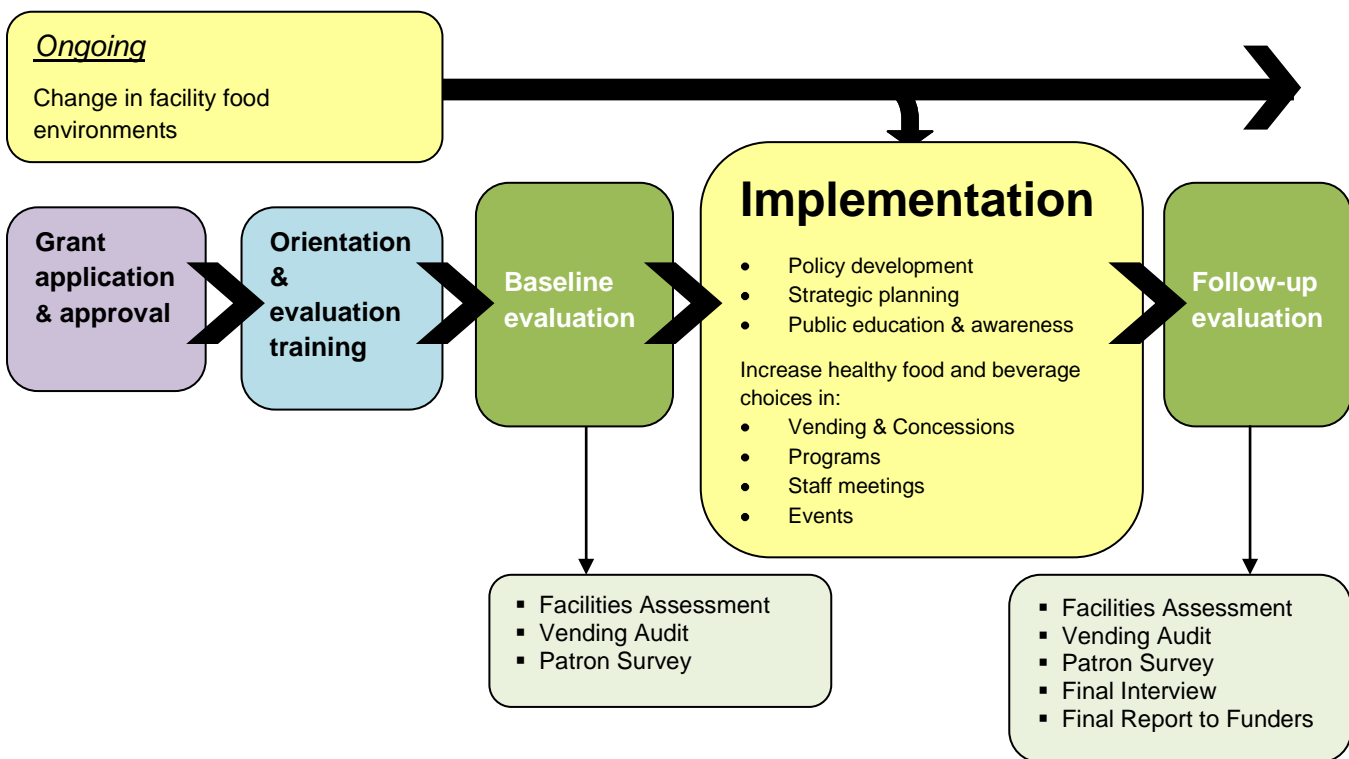
Description of the HFBS Initiative

Local governments across BC responded to a call for grant applications from UBCM and BCRPA. Applications were reviewed and accepted based on level of readiness and plans for action. Once accepted, each community was provided a toolkit detailing the steps they would need to take to improve healthy eating within their facility and awarded funding of \$7,500 CDN to support staff, implementation and evaluation activities. Project leads from each community also participated in a phone orientation meeting where they were provided more information and resources to support them in their project implementation and provided training on how to use the evaluation / assessment tools. Throughout the initiative, support was provided by phone and email consultations with the program and evaluation staff. The Brand Name Food List and Dial-A-Dietitian provided additional support from expert dietitians.

Once communities had received instruction on how to complete the evaluation they were asked to conduct baseline facility assessments, vending audits and patron surveys and if applicable, a policy assessment and food services audit. This baseline was intended to provide a snap shot of how things were before the initiative began. Once baseline evaluation activities had been completed, communities were encouraged to proceed with making changes, providing and promoting healthy choices. After several months of implementing changes communities were asked to revisit the evaluation tools and collect a follow-up measure and additionally share a bit about their experiences in implementing the changes in a telephone interview. Many communities delayed completing the evaluation because of factors such as seasonal facility closure, shortage of staff time and a desire to ensure their intervention was complete before data collection.


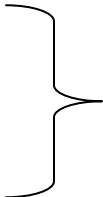
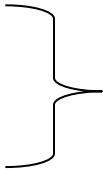
Throughout the initiative, communities were encouraged to contact the evaluation team via email and/or phone if they required support or assistance. In addition, an honorarium to each community was provided by BCRPA as a supplement to the grant to reimburse for the staff time needed to complete the evaluation.

Figure ii: Healthy Food and Beverage Sales Project Layout



Evaluation Objectives

The purpose of evaluating the Healthy Food and Beverage Sales project in Phase III & IV was:

- 1) To describe what activities were undertaken.  *What Went On?*
- 2) To determine the impact of HFBS project work on:
 - ✓ Strategic planning and overall facility environments.
 - ✓ Policy development.
 - ✓ Vending and concession services.
 - ✓ Customer choices and perceptions. *What was the Impact?*
- 3) To identify key issues related to implementation:
 - ✓ The process of changing food & beverage sales.
 - ✓ Facilitators and barriers to implementation.
 - ✓ The use of project resources and supports. *How Did it Go?*
- 4) To act as a catalyst to encourage and support communities in the planning and process of making sustainable changes.

Data Collection

Table i: Evaluation Activities Completed for Phase III & IV

EVALUATION ACTIVITY & PURPOSE	BASELINE COMPLETED	FOLLOW-UP COMPLETED
Facilities Assessment Community self-assessment that assesses the extent that organizational capacity and facility environment support healthy eating. This assessment is based on a 4-point rating scale and divided into three main categories: 1) Strategic Planning, 2) Supportive Environments and 3) Communication & Education.	11 communities representing 19 facilities Ph III: July 2009 Ph IV: March 2010	11 communities representing 19 facilities Ph III: March 2010 Ph IV: Sept. 2010
Policy Assessment To assess the development of healthy eating policy within the organization. This assesses if policy is developed in the areas of food provision, events and programs and staff. Staff may rate if specific policy is in place according to “yes”, “no” or “in progress.” The policy assessment tool was optional for communities to complete.	8 communities Ph III: Aug 2009 Ph IV: March 2010	8 communities Ph III: March 2010 Ph IV: Sept. 2010
Food Services Audit Assess the operations, preparation facilities and foods served through food service outlets including concessions and cafes. This tool provides a likert scale to rate a concession on 32 best practice indicators that were established originally for school concessions by the Ministry of Health. These best practice indicators consider operations, food storage and preparation tools, and what types of foods are served on a regular basis. The food services assessment was optional for communities to complete.	9 concessions, cafe or restaurants audited Ph III: Oct. 2009 Ph IV: March 2010	7 concessions, cafes audited Ph III: March 2010 Ph IV: Oct. 2010
Vending Audit Assesses the products in standard snack and beverage vending machines according to the Provincial Guideline “Choose Categories” using the Brand Name Food List.	60 machines counted in 20 facilities 35 machines audited Ph III: July 2009 Ph IV: April 2010	55 machines counted 31 machines audited Ph III: March 2009 Ph IV: Oct. 2010
Patron Survey Collects data on facility users in regards to vending and concession use; attitudes toward healthy food and beverages; and awareness of healthy choice messaging/promotion and changes.	N=484 surveys Ph III: Oct. 2009 Ph IV: April 2010	N=399 surveys Ph III: April 2010 Ph IV: Sept. 2010
Interview Project staff from each community participated in a semi-structured phone interview. Staff were asked 9 questions regarding the implementation process (challenges, facilitators) and resources used. Duration of interviews lasted about 30-40 minutes.	(None)	11 interviews Ph III: March 2010 Ph IV: Sept. 2010

Activities

Evaluation Objective 1:

To describe what activities were undertaken by Phase III & IV grant communities.

Implementation Activities

In Phase III & IV Communities many of the goals and activities that were undertaken were similar to Phase I & II and included the following: (as was stated in the Phase II report).

- **Increasing public awareness and education** of healthy eating included providing information, signage, handouts and information in regular newsletters and programming. Many communities also offered educational workshop opportunities and special events to raise awareness around healthy choices. In some cases, information on healthy eating was added to the facility or municipality webpage and presentations were made at public meetings.
- **Policy development and strategic planning** which included the creation of committees, consultation and goal setting for future action.
- **Creating partnerships** with local and provincial government bodies, businesses, food distributors and contractors (concessionaires, caterers and vendors) and community groups.
- **Changing concessions, cafes and snack bars** included creating new menus and increasing healthy options sold, removing unhealthy options, revising contracts and operation to ensure provision of healthy options, promotion of healthy choices, purchasing equipment to support serving healthy options, removing deep fryers and creating more comfortable areas for people to sit and eat.
- **Changing vending** included working with vendors to increase healthy options stocked, revising contracts to reflect policy and guidelines, in some cases removing machines entirely, and working towards product placement and promotion that encourages healthy choices.
- **Increasing healthy food options served** at staff meetings, special events, sports tournaments and in programs including children's camps
- **Supporting environments and opportunities for staff to promote healthy choices.** This included providing education & training opportunities for staff to learn about the initiative and related policy and environmental changes in the facilities, serving healthy food at staff meetings and making it easy for staff to eat healthy at work.

"I plan soccer and I have been guiding the soccer people ...We had the parents put together little packages of carrot sticks and celery and beans and whatever they had in little Ziplocs and then they had some dip. That is what the concession people are makingand it is amazing how many kids love it.

~Project Coordinator

Impact of Activities

Evaluation Objective 2: To determine the impact if the HFBS work.

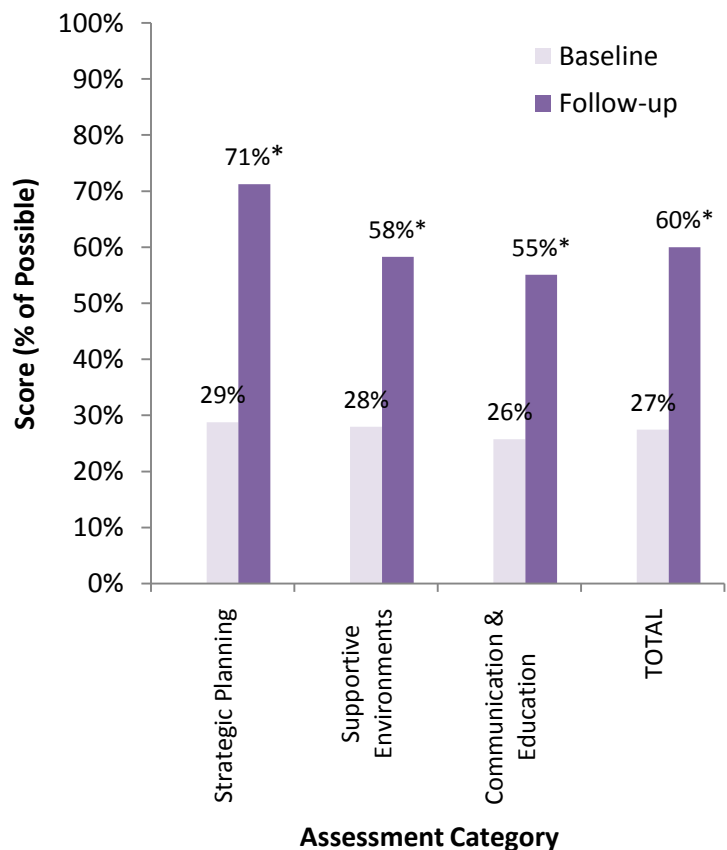
1. Strategic Planning and Facility Environments
2. Policy Development
3. Concessions
4. Vending
5. Patron Perceptions

1. Impact on Strategic Planning & Facility Food Environments

Communities made an assessment of their facilities at baseline (Phase III in July 2009 and Phase IV in March 2010) and follow-up (Phase III in March 2010 and Phase IV in September 2010). This assessment measured organizational capacity for action, current environment and involvement in educational activities. Shifts in ratings demonstrate change. According to ratings, communities made statistically significant ($p < .001$) changes in their organizational capacity and their policies, education initiatives and food environment.

- The average overall facility assessment score for all Phase II communities was 16/57 at baseline and 34/57 at follow-up, an average 18 point increase.
- Figure 1.1 shows that there was a significant difference ($*p < .001$) for the average assessment score from baseline to follow-up (33% improvement) and for all three assessment categories including: strategic planning (42%), supportive environments (30%), and communication & education (29%).
- All 11 communities reported improvements in the areas of healthy food and beverage planning, facility environments, and communication & education between their baseline and follow-up (See Figure 1.2).
- On average, greatest progress was achieved in the category of strategic planning. Through the project healthy eating committees were established and plans, policies and monitoring processes were established to support ongoing change towards healthy eating environments (See Figure 1.3).
- In the category of supportive environments, communities indicated that the greatest areas of progress had been in increasing the provisions of healthy food and beverages in internal programming, concessions and vending (See Figure 1.4)
- In the category of communication & education, communities indicated that their greatest area of development had been in establishing more opportunities for both children and adults to learn about healthy eating.

Figure 1.1: Average facility assessment scores for Phase III & IV communities



* significant difference ($p < .001$) for assessment score from baseline to follow-up

Figure 1.2: Facility Assessment Scores by Community for Phase III & IV

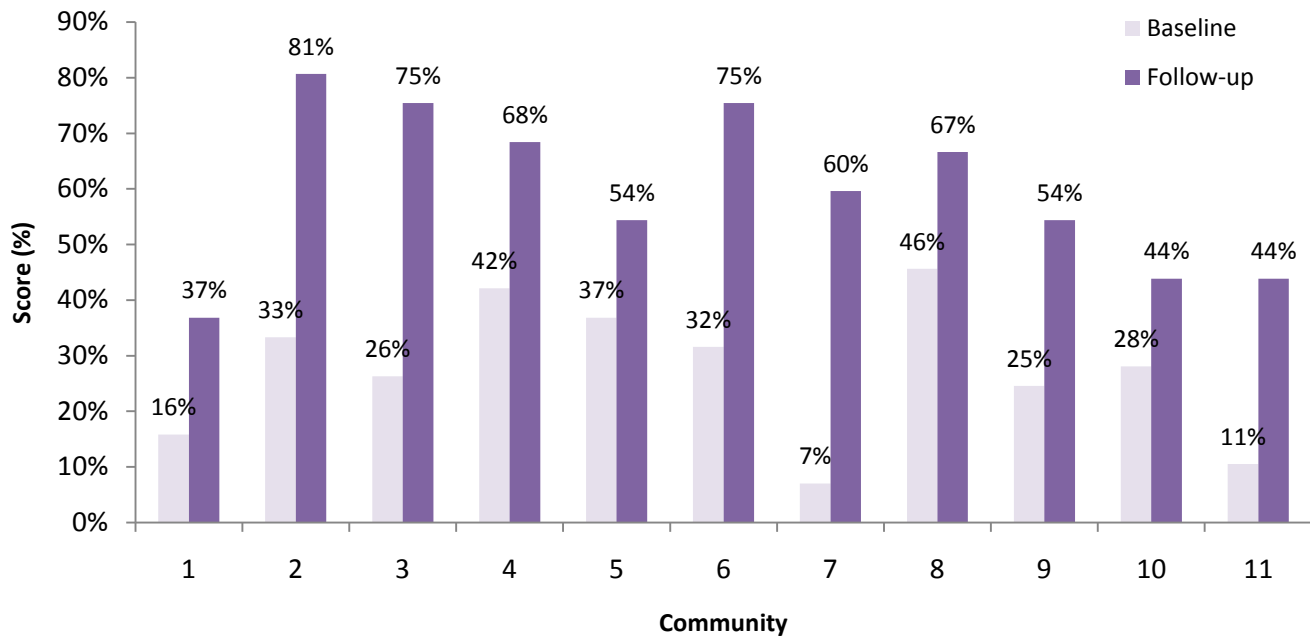


Figure 1.3: Average scores by statement for the strategic planning category

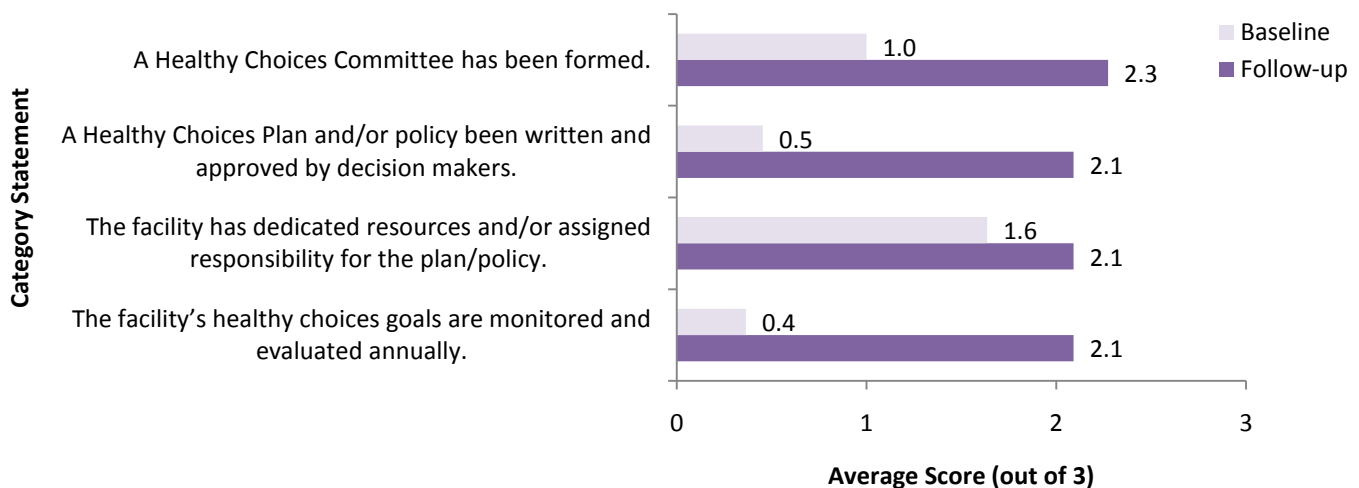


Figure 1.4: Average scores by statement for the supportive environments category

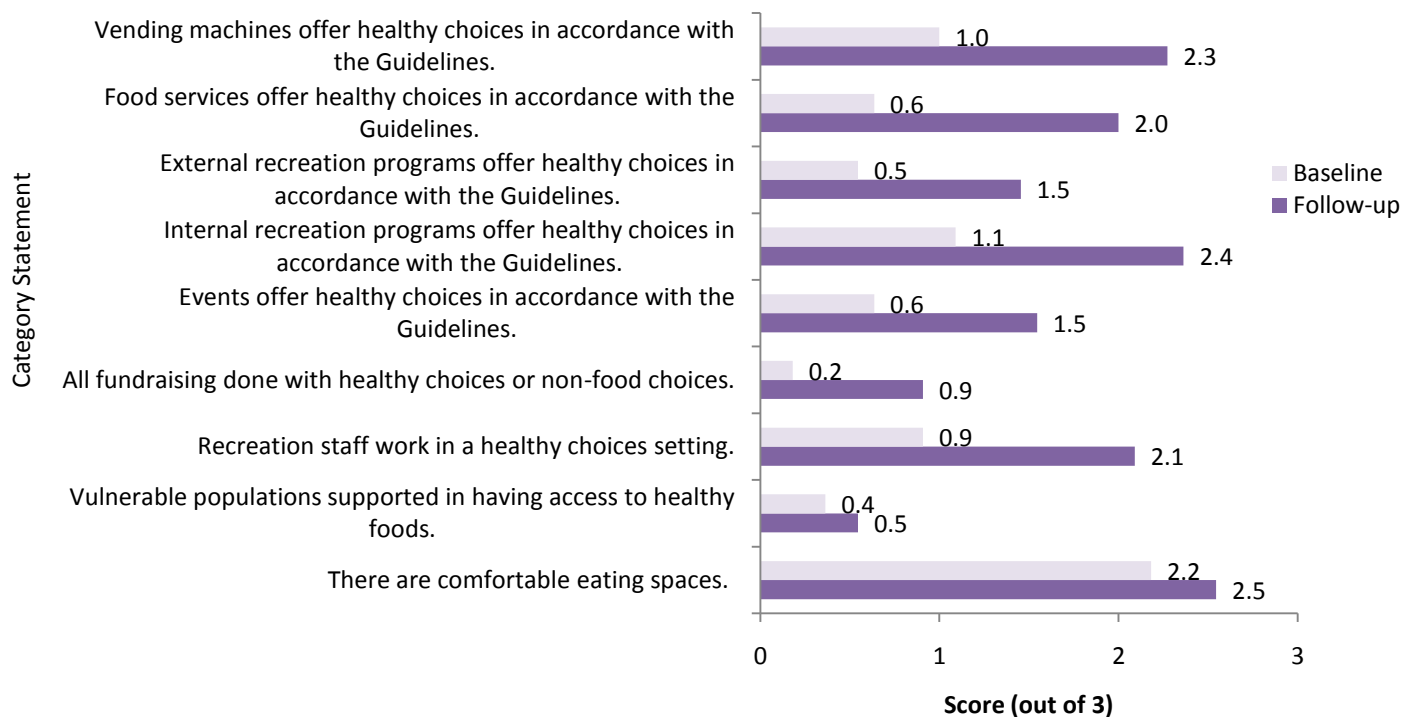
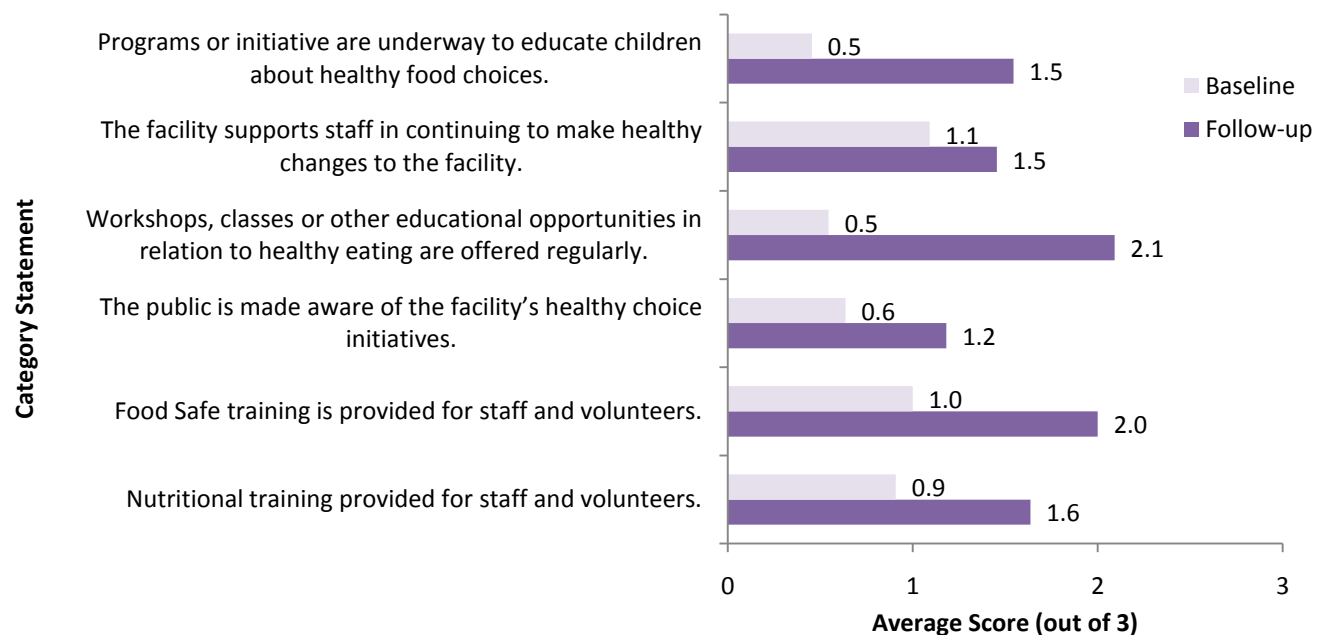


Figure 1.5: Average facility assessment scores by statement in the communication & education category



2. Impact on Policy Development

Policy development was a prominent activity in Phase III and IV and community stakeholders indicated that policy would be an important foundation for sustainable change in their facilities. The policy instrument was optional because some wouldn't be targeting policy, and 8/11 completed the baseline and follow-up *Policy Assessment*. The following summarize the findings from the assessments:

- At baseline no communities had a food policy in place, but 2 were in progress.
- At follow-up, 1 still indicated no policy, 4 indicated being in progress and 3 indicated that local decision makers had formally approved a healthy food and beverage policy (See Table 2.1).
- Policies were diverse and addressed concessions, vending, programs, events, staff practices and meetings. Most communities adopted a phased approach to change; implementing policy in steps towards the Provincial Guidelines.
- **Examples of Phase-In-Policy**

Choose Most, Choose Sometimes, Choose Least and Not Recommended (% CM-CS-CL-NR)

- Example 1:
 - Year 1: 25-25-25-25
 - Year 2: 33-32-20-15
 - Year 3: 40-40-10-10
- Example 2:
 - Year 1: 30-30-40-0
 - Year 2: 35-35-30-0

- One community decided to develop a 'philosophy' to guide action instead of a formal policy.

Table 2.1: Food and Beverage Policy Development Status by Community

Community #	BASELINE			FOLLOW-UP		
	No	In Progress	Yes	No	In Progress	Yes
1	✓					✓
2	✓				✓	
3	✓				✓	
4	✓				✓	
5		✓				✓
6		✓				✓
7	✓				✓	
8	✓			✓		

"The recommendation is to adopt a healthy food and beverage philosophy [rather than a formal policy] that will be implemented during recreation programs and events."

~Recreation Staff

Table 2.2 illustrates all the policy areas where progress was made between baseline and follow-up (each ✓ checkmark represents policy development underway at the time of assessment.). It can be observed by the checkmarks that Phase III and IV communities indicated that a large amount of policy action occurred during their participation in the HFBS initiative.

Table 2:2 Policy Assessment Results for Phase III & IV Communities

Policy Statement	Baseline*	Follow-up*
* A light green check (✓) indicates “Policy Development n Progress” and a dark green check (✓) indicates “Policy Completed ad Approved”		
Food Provision		
Request for Proposals for food-related services should require bidders to agree to meet the Provincial Healthy Choices Guidelines	✓✓	✓✓✓✓✓✓
Healthy foods and beverage (h.f.b.) should be subsidized	✓	✓✓
h.f.b. should be provided at an equal or lower price in vending machines	✓	✓✓✓✓✓
h.f.b. sold in the facility must be indicated with a checkmark or other marker	✓	✓✓✓✓✓
h.f.b. should be positioned to promote visibility	✓	✓✓✓✓✓✓✓
The marketing of unhealthy foods through company sponsorship is not allowed within the facility	✓	✓✓✓✓
Programs and Events		
Foods are discouraged as a reward in programs provided by the recreation centre and staff	✓	✓✓✓✓✓✓✓✓
Foods provided for child/youth programs on site should meet the healthy guidelines	✓	✓✓✓✓✓✓✓✓✓
Foods served at special events hosted in the facility should meet the healthy guidelines	✓	✓✓✓✓✓✓✓
Children should be provided a comfortable, calm environment in which to eat meals while participating in programs	✓	✓✓✓✓✓✓✓✓
Staff		
Food at internal staff meetings must meet our facilities healthy guidelines (as stated on the top of page 2)	✓	✓✓✓✓✓✓✓
Food at official staff social gatherings and training must meet these healthy guidelines	✓	✓✓✓✓✓✓✓
Staff must be provided with a place to refrigerate and heat food brought from home	✓✓	✓✓✓✓✓✓✓✓
Staff must be given training on how to appropriately encourage healthy snacks to be brought from home	✓	✓✓✓✓✓
Policy Development Score (one point for each check)	17	80

3. Impact on Concessions

Over the counter food sales represented another significant area of work amongst Phase III and IV projects. Grant money was used to do everything from support major renovations, to providing new equipment to developing new healthy choice menus. Several of the concessions that were being worked on had not reopened at the time of the follow-up evaluation because of the season or delays in work and therefore were unable to participate in the audit (See page 31). However, seven concession facilities were able to complete an audit to report on changes and improvements implemented. The following are examples of the types of changes that were made:

Example of changes made in a Phase IV Café:

- no longer offers sweetened cereals
- switch to low-sodium broths
- smaller portions of squares/bars
- currently reviewing catering menu to highlight healthy choices and offering a MEET SMART EAT SMART menu

Example of changes made in a Phase IV Concession:

- No longer sell Red Bull or other Energy Drinks
- Offers only 100% fruit juices
- Considering offering "healthy" soups in the fall

Example of Equipment Purchased to Support Serving Healthy Choices:

"We bought all new [equipment] for the food prep area so they can prep the healthy food because [before] it was really terrible set up. [The concession operators] said that was their biggest impediment and there was no budge to give them the proper stuff ... that is where the grant was really used. They loved it ... I just want to show them one year of doing healthy cheese sandwiches and healthy other things... Before it was all pre-packaged foods [and] they were terrified of preparing anything there because the surfaces were poor. And so we went shopping and ... for about \$2000 I got stainless steel counters all the way around a little serving cart out of which they can move food around ... They are so excited about the changes ... now we celebrate their new menu."

~Community Project Lead

"With the concession we started off with a brand new vendor ... he was ready to go and we did not put the deep fryer back in, cleaned it up, put a new image to it. We have a long-term plan in play right now, which he will be following and to get him up to 70% of choose sometimes/choose most... we're happy with the changes from the new concession."

~Community Project Lead

Description of Food Services Audit:

In addition to reporting the main changes that were made during the initiative, communities making changes to their food services outlets could complete an audit to track changes. A series of 32 'best practice indicators', (originally developed by the Ministry of Health for concessions in schools) were rated using a 4-point likert scale (1. *never*, 2. *occasionally* (1-2 times/month, 3. *often* (1-2 times/week) and, 4. *always* (most days)). Best practice indicators rated high on the likert scale indicate a healthier food sales operation. Seven (7) food sales outlets were audited at the community level by either project leads or food service operators and the collective results are presented in Table 3.1. It can be observed that there were more 'best practices' occurring at follow-up (102 instances of "often" or "always") than at baseline (64 instances of "often" or "always").

Table 3.1 Food Service Audit 'Best Practices Indicators'
(collective results from 7 concessions)

	Baseline*	Follow-up*
* A light green check (✓) indicates "Often" and a dark green check (✓) indicates "Always"		
Fruits & Vegetables Healthy Indicators		
1. Fresh fruit is available	✓✓	✓✓✓✓
2. Raw or cooked vegetables are served, with a minimum of added salt, fat, or sauces	✓	✓✓✓✓
3. Canned vegetables and fruit are low in added salt and sugar		✓✓
4. Juice is 100% fruit or vegetable juice	✓✓✓✓✓	✓✓✓✓✓
5. Juice portions are 360 mL or smaller	✓✓✓✓	✓✓✓✓✓
6. Baked fries are cooked with a minimum of added fat	✓	✓
Grain Products Healthy Indicators		
7. Whole grain products are served regularly	✓✓	✓✓✓✓✓
8. Baking recipes and commercial mixes are low in fat, sugar and salt, meeting the Choose Sometimes or Choose Most nutrient criteria		✓✓
9. The portion size of baked goods is moderate	✓✓✓	✓✓
10. Breakfast cereals are low in added sugar	✓	✓✓
11. Homemade, or commercial low sodium, low fat products have replaced regular instant noodle products and rice mixes		✓✓
Beverages Healthy Indicators		
12. Water is available to drink	✓✓✓✓✓✓	✓✓✓✓✓
13. Sugar sweetened beverages like soft drinks, punches, and iced teas are not available for sale to students	✓✓	✓
14. Hot chocolate is made with milk	✓✓	✓✓
15. Regular coffee/tea are not available for sale to students	✓✓✓	✓✓✓

(Continued ...)

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**Table 3.1 continued: Food Service Audit ‘Best Practices Indicators’
(collective results from 7 concessions)**

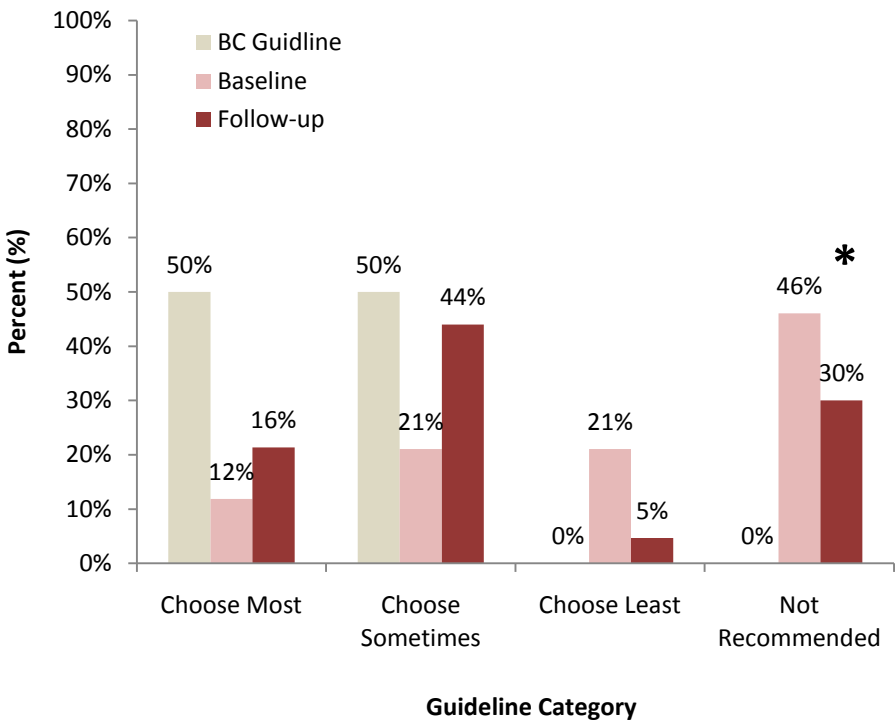
	Baseline*	Follow-up*
* A light green check (✓) indicates “Often” and a dark green check (✓) indicates “Always”		
Milk, Meat & Alternatives Healthy Indicators		
16. Low fat dairy products are served regularly e.g.	✓✓	✓✓✓✓✓✓
17. Milk or soy beverages sold meet the Choose Sometimes or Choose Most nutrient criteria	✓✓	✓✓✓✓✓
18. Only unprocessed cheeses are served	✓✓✓	✓✓✓✓
19. Alternatives such as beans, lentils, and tofu are served regularly		✓
20. Meat, fish and poultry are lean, prepared with a minimum of added fat, and cooked in a manner that reduces total fat (e.g. baked, grilled, roasted)	✓✓	✓✓✓✓
21. Fish is baked or grilled, rather than deep- or pan-fried	✓	
22. Deli meats, cold cuts, smoked meats etc used for sandwiches, pizzas and other mixed entrees meet the Choose Sometimes or Choose Most nutrient criteria	✓✓✓	✓✓
Preparation Methods Healthy Indicators		
23. Recipes are followed to avoid the unnecessary addition of salt, sugar and fat	✓	✓✓✓✓✓
24. Lower fat cooking methods (baking, grilling, roasting, stir-fry) have replaced deep- and pan-frying	✓✓	✓✓✓
25. Unsaturated, trans fat free oils and margarines are used for cooking/baking	✓✓	✓✓✓✓✓
26. Recipes or mixes for soups, gravies and sauces are low fat and low sodium	✓	✓✓✓✓
27. Breaded products (meats, fish, poultry, vegetables) are baked, not fried and meet the Choose Sometimes or Choose Most nutrient criteria	✓	
28. Tomato sauce and lower fat white sauce is used rather than cream sauce for pasta, pizza, etc	✓	✓✓✓
29. Ready-to-serve or heat-and-serve items are low in fat, sugar and sodium and meet the Choose Sometimes or Choose Most nutrient criteria	✓	✓✓✓
30. Herbs and spices are used to enhance flavour, instead of salt and salty ingredients (spice salts, salty sauces, etc.)	✓	✓✓
Condiments Healthy Indicators		
31. Condiments are offered in small portions and students are encouraged to limit their choices to one to two portions	✓✓✓✓	✓✓✓✓✓
32. Condiments offered are trans fat free or <.2 g trans fat per serving	✓✓✓✓✓	✓✓✓✓✓

4. Impact on Vending

Vending continued to be a challenging area of change for Phase III and IV facilities, and challenges and barriers to change were very similar in these facilities as to those in previous phases of the initiative. There was a small increase in CM (5%) and CS (8%) products as well as a decrease in CL (-4%) and a significant decrease in NR (-9%) products. Two communities actually removed machines in the course of their project while others revised their contracts and hired a new provider who would be able to supply healthier choices. No community was successful at achieving 100% compliance with the BC Public Guideline; however, three of the 11 communities were very close (See Figure 4.2 for an example of the most successful shift).

Figure 4.1: Baseline to follow-up comparison of all vending products by choose category

Baseline all products (N=871); Follow-up all products (N=790)



* indicates a significant difference (t= 2.306, p ≤ 0.05) between baseline and follow-up

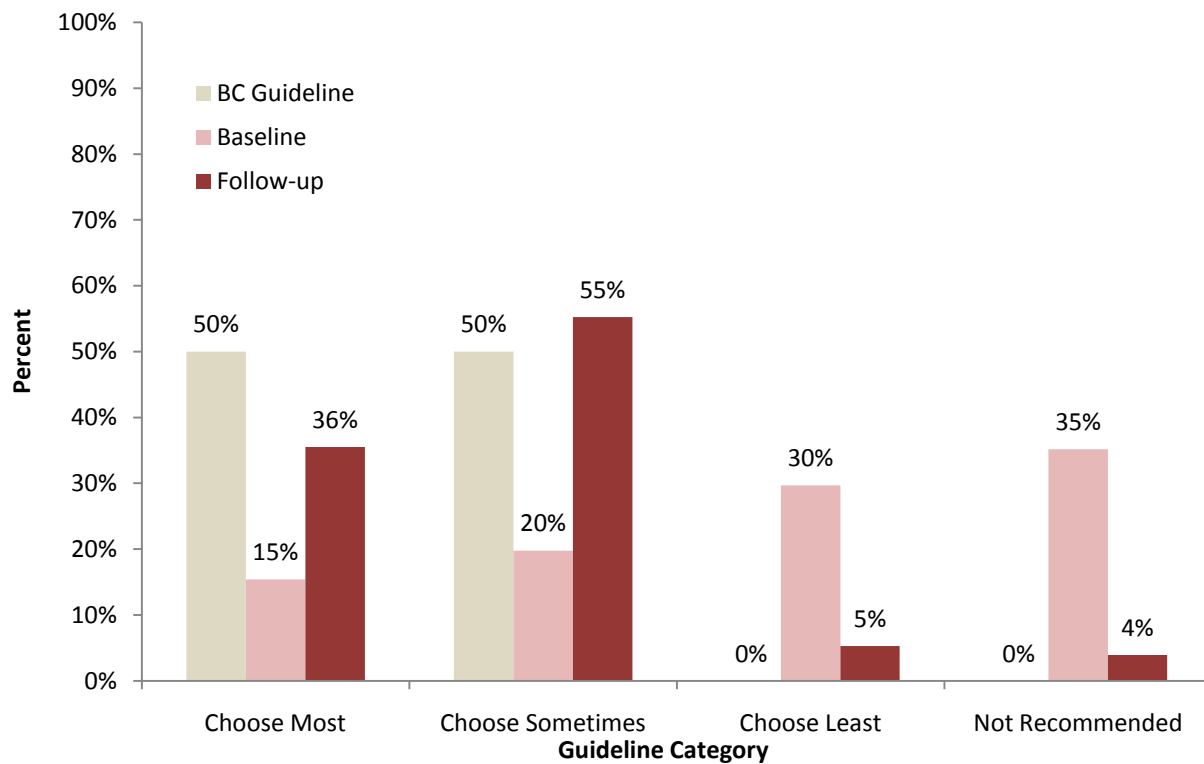
Patron Comments Regarding Vending

- I think the vending company has great array of choices. I'd like them to really embrace the healthy options and move away from fun-food (choc bars chips).*
- I teach karate at the Community Center and is the reason I am there so often. Would like to see candy machines removed.*
- I spend a lot of time here (almost every day) and find I have to go away from the centre to get a good lunch meal- salad or sushi or sandwich etc. (I usually bring my own food)*
- The items in the vending machine are too expensive*
- I love the seaweed!*

Figure 4.2: Audit results by choose category for most successful vending change amongst Phase III & IV communities

2 snack machines (n=70 baseline products; n=58 follow-up products)

2 beverage machines (n=21 baseline products; n=20 follow-up products)



5. Patron Survey Results

Survey Overview

Between October 2009 and September 2010 n=883 surveys were filled out by patrons in Phase III and IV facilities; n=484 during baseline collection in October 2009 (Ph III) and April 2010 (Ph IV) and n=399 at follow-up in April 2010 (Ph III) and September (Ph IV). Although the groups of patrons surveyed were not necessarily the same individuals between survey periods, descriptive information collected by many of the questions showed the samples to be similar. More specifically, there was no significant association between proportion of patrons by gender, age, education level, and frequency of visits to the recreation centre and the time surveyed (baseline vs. follow-up).

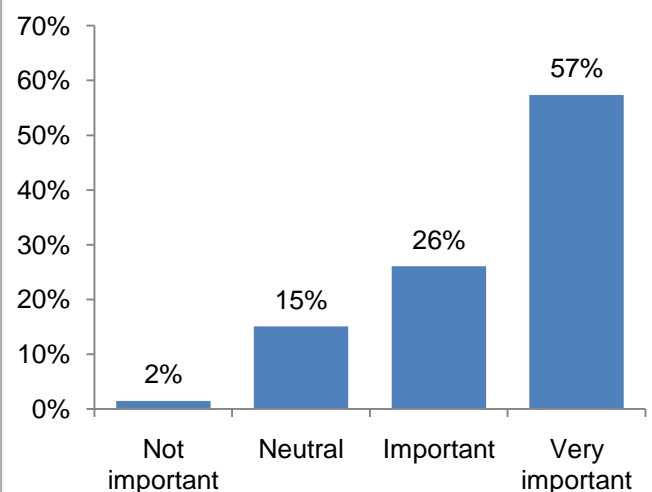
"We really need to be proactive and make it known what we have in our facility. The survey was a great way to do that because it gave us an opportunity to talk about the things that were happening here and what we were undertaking."

~Recreation Staff

Who are the survey participants?

- The survey findings reflect the perceptions and behaviours of people who:
 - a) regularly spend time in the facilities: 84% at least one day a week or more
 - b) value healthy eating: over 80% indicated that healthy eating was either "important" or "very important" to them, See Figure 5.1)
- The most commonly indicated purposes for visiting the facility were to visit the pool (22% baseline and 21% follow-up), for children's programs (20%, baseline; 17%, follow-up), and for gym and fitness (16% at baseline; 19% follow-up).
- The largest demographic of patrons who responded to the questionnaire administered in Phase III and IV communities were women, age 36-50 and had a post secondary education.

Figure 5.1: The importance of healthy eating to patrons



What are the Patrons' Purchasing Behaviours?

- There were no major changes in purchasing patterns between baseline and follow-up survey round
- A majority of patrons (72%) did not buy a food or beverage on the day surveyed
- In addition, most patrons reported rarely to never making a purchase at the concession or vending (See Figure 5.2)
- When they do make a purchase at the concession or vending , patrons indicate that more than half the time (54%) they buy a beverage, often (40-45%) they buy a snack, and rarely if ever (<5%) of the time they buy a meal
- Half (49%) said they would buy healthy choices if offered at a comparable price to other options, and 37% said they would buy healthy choices even if they were more costly.
- In addition, when asked if offering more healthy choices would impact their purchasing, half (50%) said that they would make a purchase just as often 47% said they would likely purchase more often if more healthy choices were available
- Many patrons commented that their time in the recreation facility was often the time when they allowed for treats and less healthy options while others were very supportive of making healthy options a priority.

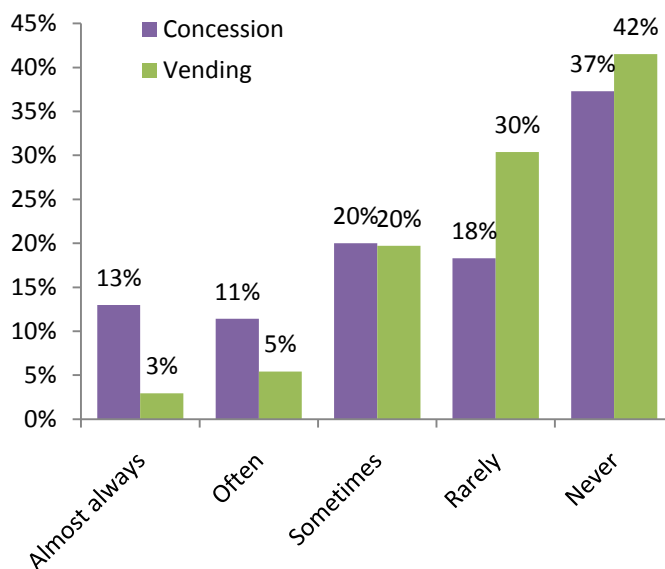
"I save the healthy eating for home life! Eating burger and fries at hockey games is a treat that I allow outside of home life!"

~Patron Survey Comment

"If people want unhealthy food they can bring it from house! The food offered should match the mission of the recreation centre. Thanks for getting us all to think about healthy eating."

~Patron Survey Comment

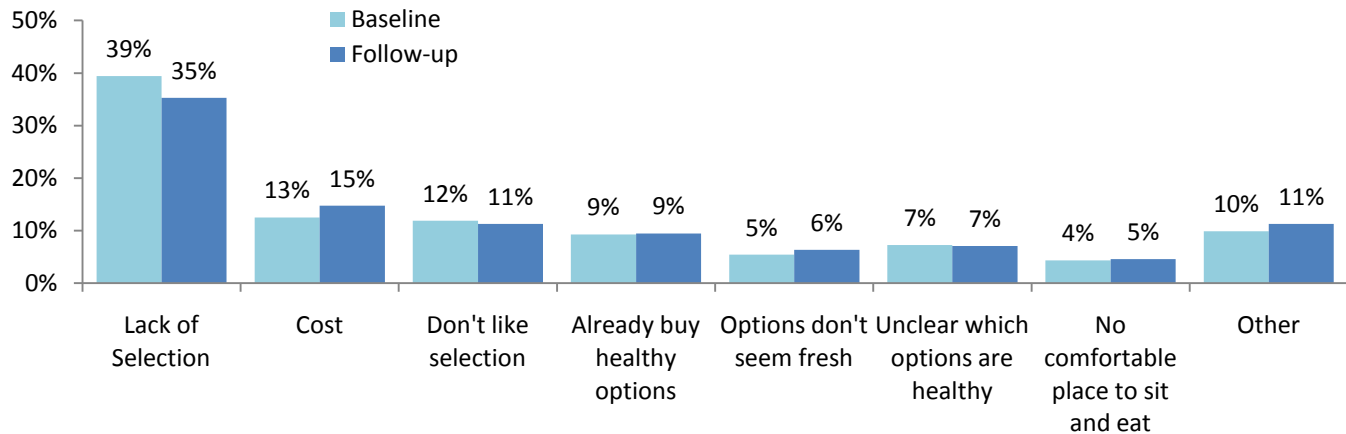
Figure 5.2: Frequency at which patrons make a purchase at the concession or vending when in the facility (average over baseline and follow-up)



Barriers to Purchasing Healthy Choices

The greatest barrier at both baseline and follow-up survey measures was lack of selection followed by cost. Figure 5.3 shows a significant decrease in lack of selection as a barrier from baseline to follow-up ($p < .001$) indicating that the intervention may have resulted in more healthy options for patrons, or at least an increased awareness of healthy options.

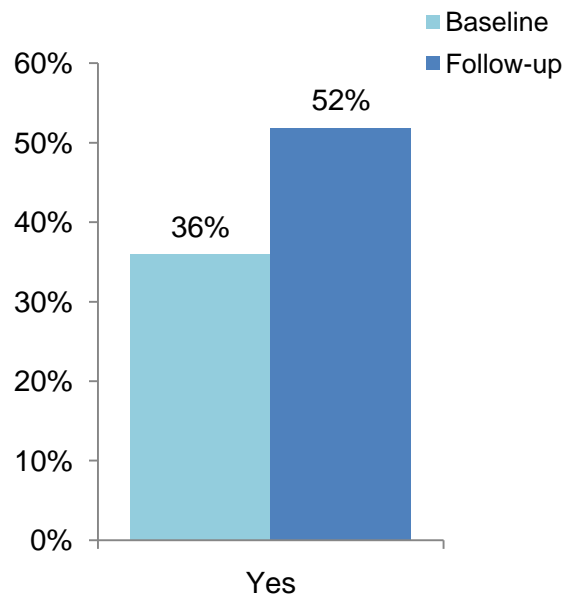
Figure 5.3: Barriers to buying healthy options at the facility



Patron Awareness of Healthy Choices

Patrons were beginning to see a difference in their facility. As indicated in Figure 5. 4 there was a significant increase in patron awareness of healthy eating promotions at follow-up compared to baseline ($p < .001$). The most commonly reported promotional item was printed materials such as flyers and posters (23% at baseline and 29% at follow-up) but overall patron awareness of healthy food and beverage promotions or offerings was low.

Figure 5.4 Patrons aware of healthy eating promotions at the facility



Implementation

Evaluation Objective 3:

To identify key issues related to implementation including:

- ✓ The process of changing food & beverage sales.
- ✓ Facilitators and barriers to implementation.
- ✓ The use of project resources and supports.

Staff Interviews

One project staff from each of the participating 11 communities in Phase III & IV participated in semi-formal interviews at the end of their grant participation and was asked questions about the implementation process (challenges, facilitators) and resources used. Duration of interviews lasted about 30-40 minutes. All responses from the interviews were digitally recorded, transcribed verbatim and then themed in NVivo 8.0. A summary of the common themes are included in the proceeding pages.

The following pages provided an organized summary of the responses by question which highlights common and unique themes. Key quotes from the interviews are given to provide depth and insight into their experiences in working on the healthy food and beverage sales program at a community level.

The Process

Interview Question: For the past few months you have been attempting to change the food environment in your facility. Can you describe your process to date?

Communication

"I find a lot of time is spent again on the communication side of things. Making sure that everybody is kept in the loop. All the emails, all the phone calls, all the meetings and I've really tried hard to keep it all very personable and so people feeling comfortable. Because I think you get way more support that way when you're keeping people informed about everything you're doing."

"I wanted to make sure I stepped very slowly and really communicated effectively with everybody. So, not so much even that you're trying to win people over but in a sense that you are, right. They were very much some people who were not supportive of the project who thought it was a bunch of fluff, right?"

Gaining Buy-In

"We need to make this switch over but we need to really cautious about how we go about doing it and get a really good buy-in from everybody versus just a select few."

"I don't think it will be very well received in the beginning and it is going to take a lot of public consultation and a lot of meetings if we are going to see any change there. It doesn't mean it can't happen."

"The three year policy phase in will have a legacy of buy-in and trust building and the fact that we are not going to go for 100% choose most and sometimes, I think that that is our legacy, is that our contractors and our clients and stuff are going to trust us better in the long term than if we had just gone full major policy change. And it has allowed us to develop those relationships."

(The Process Continued...)

Focusing Internally before Externally

So we feel that the staff have an awareness of what the initiative is and that it is supported and that the staff has buy-in. It is almost as if we feel primed now that when staff go to the vending machine and they can't find pop they will understand why and they will understand the background rationale ... We feel by front-loading the staff, the staff now feel prepared to begin to support in nutrition and healthy eating in their programming ... the stage is set for nutrition programming to be welcomed into the recreation programming, the community programming ... We felt we would go from the ground up in this program as opposed to going straight to the public and saying 'we are a Healthy Choice facility' and the staff scratching their head and going 'what is that?'

"[We are] looking at the internal policies and getting those changed even to say we will provide healthy stuff to our staff. We will promote healthy food and beverage to our staff. We will promote healthy lifestyles to our staff. And making the change within our organizing first before prompting the other organizations that we lean on to make their change."

Local Government Process

"As we move what also happened in May, June and July was that we developed the Guiding Principles which looked at everything, basically looking at what we needed to put in for supportive environments and policy from the original audits, we put on paper. It was reviewed and approved by the Healthy Choices Committee. Then it was moved and now it is in the hands of the Community Services Board. Then it will go to Council."

"When I own my business, when I was a business owner I just make decisions right then and there, but here because I am a municipality and an employee of the City, I have to go through and get the support of the City so that takes time, and that can be a challenge."

Addressing Social Culture

"When you are switching culture, you can't do it fast and you can't lay it down. It has to come from within. [It has to come from the people]. And that is where I keep going back to those surveys and the baseline information. We were providing junk and it was really sobering. It was like "Wow, we are really bad here". So it just gave us that focus to change the tide."

"The city hall [meeting] was interesting because the only people that showed up to that one were the people that eat healthy already... we definitely see the need for this change to occur, but we also recognize that there are some roadblocks... because there's people who only eat unhealthy and that's all they've ever done for their entire work life. They've been working for the municipality for, you know, 20-30 years and they expect these things to be in their vending machines or be available when it comes down to meeting the other things ...how do we make that switch over"

"I often refer to people saying "remember when we used to smoke up in the stands 30 years ago? How much would that be accepted now? That is the same as this. That was slow, that wasn't overnight. It was slow and steady". And now all you have to do is travel somewhere where they don't stop smoking in public places and everyone goes "wow, yah, you're right ...it's the same with healthy eating."

(The Process Continued...)

Changing Perceptions of Choice

"I mean when we tell people when they say "oh yeah, you're taking away our choice with taking away the junk food" ... people tend to be defensive when they lose the option to choose. But what we're saying is we're presenting other options. And if you want to buy a chocolate bar you can just walk a block away."

Small Steps for Big Change

"[The minor hockey league] absolutely loved it and so did our vendor contractor because it wasn't "boom" overnight change, right. Because we are changing what we are offering in an achievable manner."

"We're sharing with them and educating them... they take that home and start educating their families to do things a bit differently at home. I think [it] snowballs out into the community just with a little baby step."

"Little change, but little steps count."

Change takes time → "We are just getting going now!"

Many communities explained that 8 months after receiving the grant was when they finally were getting the momentum to actually make tangible changes in what foods were being provided and promoted. Up until this point all energy and effort had simply gone into laying the foundation for change whether that be gaining buy-in from the community, staff and leaders; developing guiding principles and policy; or building the right relationships and negotiating contracts and operations with vendors, concessionaires and other food sale operators.

"At this point we've only got to the point where we've got a report and a pathway laid out for us. So we haven't got down the path of marketing healthy food options, we haven't gone down the path of truly doing....starting the promotion of everything else for food."

"That was a bit of a delay with the project. So I think then when we really get it out I hope in fall to really launch things because our pool is actually going to be closed for renovations from June until September. So that's tough. So we thought we're going to probably postpone the big launch of everything until the fall when they are RFP's have been done."

"The process takes time, especially if you are starting from scratch. It really does take time".

When asked how much time project staff believed would be necessary to actually make the changes they had hoped for at the beginning of their project, a majority indicated that at least a full year and up to 3 years would be ideal. This is especially important for facilities that are only open or in full operation seasonally.

"We only have two vending machines for five months of the year ... So if it went for a full year then we could do things."

"I would allow going through the seasons. We were lined up, just like we are challenged now. There is nothing in the arena from April to September right. So that stops the whole facility part so that pushes it into September. That is just our reality."

"I would suggest Nine months, and not over the summer."

Implementation Challenges

***Interview Question:** What were the key challenges you have faced as you began to approach the issue of environmental and policy changes in your facility?*

Public Resistance

"The biggest challenge is the public opinion ... the opinion of the minor hockey association which is the group receives the revenue from the concession ... and also the users because, as soon as they heard 'healthy food' assumed that we were going to take away the gooey fries and the greasy hamburgers ... So that public opinion was really hard to break through. Everyone had their back up right away, they had their own impression of what the purpose of this was and that was really tough."

"[Patrons] are passionate about their sport and their facility and how they want to see it run. The people don't take to change very well."

"It is funny, there are some people that are 'yep we need healthy choices' but there are some people that are saying 'I go to the arena for gooey fries, if I want healthy food I will go home'."

Challenges Working with Vendors

"Vending hasn't been as supportive about making changes as we would have hoped. Because I guess in their minds they're thinking they might not get the contract. So they're willing to do a little bit, but not huge amounts."

"Our vendor is flatly refusing healthy choices. Because his bottom line is that he can't afford it even though we're giving him options ... He has arguments."

"They basically sell 100% not recommended choices. So they have been approached to make the change, it was offered to have me come in and help them in the change. But they basically declined and continued to sell all the not recommended choices. So basically the kids know that if they want those chocolate bars and chips and great big cookies they can just go into the gymnastics area ..."

"I've had lots and lots of meetings with the representative from [the vending company] and they're interesting meetings right. They have their own agenda a lot of times."

Product Stocking:

"What I found with experience is that [vending company manager] understands the guidelines but sometimes the drivers who are loading the machines don't know that this one is one that's supposed to follow healthier choices."

(Implementation Challenges continued ...)

Challenges Working with Food Service Providers & Concessionaires

"You know we had a long conversation with the food service provider saying... 'you're not really trying the healthy options. You've put a basket of fruit on the counter but the menu still says burger and fries. What are people going to go for?' Well, they're going to your restaurant because of the burgers and fries not because of the basket of healthy fruit on the counter. But if your menu says something else, then they will start going to your establishment for those purposes and look for the healthy options."

"Evolving them from the pre-made package stuff to that it is ok to prepare your own chilli in the kitchen ... every time they went to do their own food prep the food safe issue would come up."

Gaining Buy-In from Decision Makers

"Council actually buying into this ... is more of a worry for me than it was anything else."

"Some of it is political priorities and administrative priorities ...and sometimes it isn't seen as a priority."

Staffing Issues

Staff Turn-Over:

"Our director in our office has retired and we have a new director that moved in February. There was a little bit of... that's part of the delay in getting some of this going as well."

"So I'm a little bit concerned that all of the huge gains that have been made might not be there long term...if [my co-worker on the project] happens to leave as well because she was a key player."

"It is really all about finding somebody to lead this program and unfortunately, right now as it stands I am outta here and I am not too sure the current coordinator has the same passion..."

Staff Limitations:

"I think the other challenge long term is that the rec center staff is so busy ... if the concession changes, their menu, or there's more products that come in, there's nobody that really has the time or expertise to take that on."

"I found challenging because I didn't have a set position with set hours... That I found really challenging because then [my main work] soaked up my whole day... and if I had to do anything with the Healthy Food I had to do it after my shift was over. So it didn't leave much of my day for me to look at it and put more energy in, and that was unfortunate."

(Implementation Challenges continued ...)

Gaining Buy-In from Staff

“One challenge would be... getting everybody together. Getting everybody excited about the project. Getting people on your committee ... you don’t necessarily want people right off who are going to support it whole heartedly because it’s good to ... I think it’s important to have a bit of a mix ... because with some of the programmers they were kind of “hmmmm” you know, sitting on the fence prior to the meeting. So it was good to listen to their concerns as well.”

“Some challenge will be getting everybody on board ...programmers ... reception staff ...maintenance guys will be sort of the next group you know. We will have to tread very carefully. I mean these are the guys who bring cans of Coke in for their dinner right. So they’re just gonna be have to handled a little bit differently I think than some of the other people. So I’ve tried to be really sensitive to all of the different groups in all our facilities.”

Communication Challenges

“So communication had to be shared with [several key] people. And then we have upper management and then we have recreation commission and then we have programmers and staff you know including maintenance staff. So I’ve found the communication piece was huge, right.”

“The biggest challenge that we faced was the absolutely big size of this facility from the perspective of numbers of employees. And trying to figure out how to get the information to the key decision makers. This facility is huge and so interconnected with the many different Boards from the Community Centre Board, from the Community Centre Board to the Senior Centre Board, to the Council to the Executive Director.”

Small or Rural Community Issues

“One of our other challenges was looking at products and finding a shelf life for the product. Because we’re a small community and we don’t have major sales is what products will be put in and what is...are we looking at throwing away expired products simply because we had to buy in case lots that aren’t going to last.”

“We’re a small community and a little bit rural there’s a little bit the options aren’t so available.”

“The users, are of a small town and are you know, opinionated...they are passionate about their sport and their facility and how they want to see it run. The people don’t take to change very well. I guess what I am trying to say is that we are a small Northern community and don’t take to change very well and I am not saying everyone is like that and I don’t mean to say that in a negative way.”

Threat to Fundraisers

“There is a lot of minor hockey players and this is a huge fundraiser for them ... The choices they are offering in there are probably cheap because they are buying in bulk, so change is actually going to cost them money. At the end of the day, the increase of cost[from healthier choices] is going to be put on the player or the parents of the player, which I happen to be because I have two kids in hockey. To me I would rather increase the cost to make it fair to everybody, but I work for government and that is just my opinion on that and my opinion doesn’t matter in the whole scheme of things.”

Project Timelines

As in the first two phases of the initiative, project coordinators in phase III and IV of the initiative listed the timeframes as one of their major challenges. Many recreation facilities are seasonally open, particularly in small communities, and in some cases facility closures limited staff capacity to implement changes or collect information on the food environment for the evaluation. In addition, the time required to negotiate food service provider contracts and complete renovations or changes to concessions ran past the time of final reporting and follow-up evaluations.

“With the size of the facility ... the timeline is very hard to get things to move through quickly.”

“That’s where I found it difficult, Here’s another day gone by, another week gone by ... I found once you get a hold of the vending company...that’s just the start. It doesn’t mean something is going to happen right away.”

“It was trying to fit it in between other events that were going on and pool closures and staffing and so I guess that leads us to the challenges which was timing and staffing. It was fitting it in at the right time.”

→Delays in Implementation because of Renovations

“The main challenge is the renovation because I am guessing they are about three months behind. They should be open now. We have hockey starting next week and we are not ready to go ... that is the very frustrating part ...looking forward to having everything in place and then as summer has gone on watching nothing happen... that is a bit of a challenge is to remain patient here.”

“So I think then when we really get it out I hope in fall to really launch things because our pool is actually going to be closed for renovations from June until September. So that’s tough.”

“We have revised our menu [but since] the facility is still under renovations we haven’t been able to implement our changes but they are ready to go. As soon as our doors open we will start putting our changes into place.”

→Delays in Implementation because of Seasonality of Facility Operations

“I am hoping to see that by the end of this actual hockey season that is running from now, the ice is in, until April. I am assuming he will have that done by the end of the year so that by next September when the arena is actually starts running for the winter months, the new season starts and whoever is running that concession knows about it, there is written agreement.”

“It was trying to fit it in between other events that were going on and pool closures and staffing and so I guess that leads us to the challenges was timing and staffing. It was fitting it in at the right time. Our summer is a different groups of patrons than our fall patrons so to interview them here is not necessarily going to capture the people who most use out facility during the fall and winter, and early spring.”

→Delays in Implementation because of Contracts

“So we thought we’re going to probably postpone the big launch of everything until the fall when they are RFP’s have been done. That was a bit of a delay with the project.”

“With those RFP’s... that kind of has put a little bit of a crimp in the timeline as well because I had hoped that those would be done and we would be able to kind of have a big launch, a big hurrah now but it’s ok. Everybody’s supportive to wait so that’s good right. They’re not ...saying ok the project ends at the end of April when you hand in that report then we put it on the shelf ..but we still have to wait.”

Factors that were Helpful in the Implementation Process

Interview Question: What were the key factors that helped you proceed? What helped you make changes?

The Orientation Meetings

"[the evaluation coordinator] had done such an amazing job at that orientation. Like I still have [her] folder with all the little stickies, [she] presented that so well, I really appreciated that because [she] outlined everything so carefully. Because I went into the project thinking "oh my gosh - it seems so daunting." But when I left the orientation I felt really positive about everything right. So that was very very helpful."

"the orientation at the start was excellent. That day spent in Vancouver was excellent, meeting other coordinators, connecting with [the project staff, evaluator and dietitian]. That was very, very helpful."

Buy-In from the Public

"The people were great ... I have never had the support of so many people. And you get the key people, these are the people that actually help make change and move the community in the right direction .. [my boss] was surprised by the group that I gathered, because she didn't realize these people existed. So it was surrounding myself with great people and that is key."

"Taking comments from the public saying 'why don't you have this service' or 'why don't you have this type of food or this type of drink? ... 'when are these changes going to occur?'. So there is very much support from the public saying 'oh, it's about time you guys started looking at this stuff and making decisions and... look at the bigger picture'."

"The general response from staff and the public is they are looking forward to having something new and unique."

Buy-In from Management

"The biggest person to sell the idea that we should be going down this path was our parks and recreation director."

"I found my management supervisors were very supportive."

"I know that the recreation Director, will definitely when it comes to renegotiating any vending things ... she will still be here to lead those types of issues. She is fully aware of it. She was the one to apply for the grant and she wanted to see something happen. She still has a vested interest in this particular program."

(Factors that were Helpful continued ...)

Buy-in from Food Suppliers

"I have been doing is meeting with a lot of different distributors...They will bring me samples and information on nutritional foods that that a particular broker will sell. The rep from my deal with [our supplier] has been really good. 100% supportive as well.... She is introducing me to people who sell their products ... It is actually quite nice to know they are working with me."

Buy-In from Staff

"It was some of the staff saying on a regular basis we need to look at other options in our vending machines or taking comments from the public saying 'why don't you have this service' or 'why don't you have this type of food or this type of drink' or whatever else. And 'when are these changes going to occur'."

"Again reception has been great. They have been really supportive ... Our reception tends to be really healthy group of people. They were an easy group to kind of sell everything to. Because they kind of think that way already so. That group was particularly supportive and so again they're because they are your front-line people you really want them supportive. You know a lot of times the programmers are up their offices. And we don't have that face-to-face connection with people all the time."

"Staff have been very supportive. They want to see changes. And not just the food and beverage staff, the maintenance staff as well. They are here working and they may not just want to bring lunch and then they know they will be able to get more than a burger. They will have other options. You know healthier choices. So I am getting a lot of positive feedback from them. And staff, my staff are looking forward to it as well."

Buy-In from Local Decision Makers

"We have a Board of Directors, they are on the band wagon and everyone is really supportive."

"If you don't have the key players supporting you 100% then there could be a lot of negotiating going on between what you want and what the manager would want. Or what I would want opposed to what the manager would want—but no, that has been good."

Supportive Policy

"Once we established what the policy was going to be, knowing that it's in place to guide us is huge, because 'ok this is our goal' and it's something tangible that we look at and go striving for."

it was is great they have the policy itself provides them a guideline for how to promote the product and how to educate the consumer so it gives them the information to go forward and go 'well the reason we're selling this is..and did you know' then you can follow through with education. So the policy was a great back up for them."

(Factors that were Helpful continued ...)

Hiring a Dietitian or Expert

“As I have background as a Registered Dietitian, I was able to address everything from person questions about allergies to ... to why from a workplace health point of view why we should be focusing on water opposed to pop and suggestions on where people could eat ... The response was incredible. “

“Having the money available to hire a qualified consultant was huge ... we were able to bring in that other qualified person, she’s a dietitian, she is a nutritionist, she is in our community. I wouldn’t have been able to afford that with our current budget. That was really huge. She is still in our community, she has made herself available for free just to make this happen...”

Having a Project Champion

In many cases the project champion was the one being interviewed and so didn’t typically mention themselves as a helpful factor. From the observations of the evaluators, project champions had a few common factors in common: 1) Already involved community citizen, often already a recreation staff member or a parent with children in recreation programming 2) personally convicted of the importance of healthy eating 3) a big picture thinker 4) a good networker and communicator who is unafraid to bring people together.

“To be able to share in this kind of grass roots movement toward healthy eating for me really exciting because it’s something I feel really strongly about in my own personal life so it’s easy for me to be passionate about it because I really care about it.”

“ Another key factor I have to admit is myself, because I am so keen on making healthy choices and I live that life so, I think that they chose a person who really appreciates making those healthy choices and actually support the activities we are doing ... I am a champion. I have a star in my room here that says I am. I am just kidding. But it makes sense. If you walk the talk it just makes much more sense.”

The Provincial Guidelines

“To me it’s just not viewed as a priority. Now what is helping is the fact that there is provincial guidelines that’s being dictated. And it’s not just sort of a direction run by fraction of the community ... It’s sort of provincially mandated and so that does help move that process along.”

Dial-A-Dietitian

“I found having the dial-a-dietician was helpful if I had questions about things.”

“I found that Dial A Dietitian way exceeded our expectations of what we got, and what knowledge they had. They were amazing. This is like a Masters dietitian type person and she called them and was so impressed ... this is something we are going to continue to use.”

(Factors that were Helpful continued ...)

Brand Name Food List

“The other thing I really liked was the Brand Name Food List. I used that a lot. I picked out all the Choose Most and Choose Sometimes and compiled a list and from that list now what I start bringing into the vending machines and what I start selling out of the café. That is going to be my resource. Anything, if it wasn’t Choose most or choose sometimes, I didn’t even put it on my list. And even just things like yougurt. I couldn’t believe [so full of sugar!].yeh. I thought this was healthy and granola bars and all these things. I was going “Oh wow!”

“The Brand Name Food List is a great resource and I’ve actually used a number of times when I can’t find products I want that we’re looking at. Have sent them to be researched, to be added to the list. Which is great. Because then you have people that are dieticians making the decisions and it’s not a grey area. So it’s really nice to have that as a tool.”

Learning from Other Communities

“Moving forward I have found the help of the coordinators from Phase one and two has been really very helpful. I spent a lot of time talking with [another project coordinator from a phase II community] ... He was great. I met him at a workshop sort of when this project was getting going and we just hit it off and he’s been a great resource. I found to help me move forward,

“When [the project coordinator from another Phase II community] came on. She was just a fountain of information. She was great. And any little emails I would send out just saying any suggestions for this, she always had emails back right. She’s an incredible resource. She’s a champion. She was very helpful and very willing. And I sure hope down the road when once I’ve worked through this process that I’ll be able to do the same for people.”

“I talked to people, —similar communities. I know I talked to once other person, I can’t remember. I talked to them and got their reports and feedback. That was very very helpful. Most of them were very receptive to having that conversation. That was pretty cool.”

(Factors that were Helpful continued ...)

Unique Facilitators

The following were helpful factors that were unique to one community. Although these were not prevalent amongst many communities, they still seem important to mention.

Timeline extension:

“Having the grant window allowed us to succeed. If that had been so firm and we would have had to do it in the first four months, we would have failed, we wouldn’t have gotten to where we are now. That really helped us to succeed.”

Motivation of a timeline:

“One key factor again was the fact that there was a timeline, like “Oh my gosh this has to be done by this date”. So when there is a timeline it is like “ok, so let’s work backwards from the timeline”.

Food Lists:

The shopping lists were really helpful, I think without those shopping lists it’s quite a bit of work for...for example the concession stand doesn’t have access to the internet, so having the shopping list was really helpful.

Vending Plannogram:

“We established the plannogram into the vending machines so that someone like [my coworkers] can just go up to a vending machine and at that point look and make sure that whatever is in the vending machine, is what is written on that schematic. So that was a big one ... It’s inside, yeah it’s stuck inside so you can see, no one from the public can take it off. So if somebody else comes in then they know exactly what goes into that machine. It’s got the exact product that goes in there; every column has something to account for.”

Feedback on Program Resources & Supports

Interview Question: Can you describe how you used the resources and support provided by the HFBS initiative? E.g. website, marketing materials, toolkit, funding, communications?

The Funding

"I think the money was the carrot. The basically gave us the funds to be able to make the changes again. I... You know, it's not their key area of business. So without that funding I don't think it would have happened."

"The funding was absolutely instrumental in being able to take on this project for [this local government]. We have a very small budget as opposed to other facilities in larger cities and I don't work full time. I am permanent part time, so this gave me the opportunity to focus my energy and time to get this organized and together. Because without the resources the changes might have come, but it would have taken years, and long time ... but now I am going to implement this all at once."

The Toolkit

"The hard-copy toolkit was very user friendly and was sort of the bible of the project. We refer to that all the time. I like the way it was laid out, because as we needed information we could just go to the index and find where that information was."

Communication with UVic and BCRPA

"I found the accessibility of [the evaluation coordinator at UVic and the provincial coordinator with BCRPA] was really helpful. You know and I could always contact both of you with anything and you'd get back to me quickly."

"And it's been thanks to [the UVic evaluation coordinator and BCRPA project coordinator] that I have never felt alone because you're at my fingertips you know. So I've felt so supported ... people here as well don't have the resources that you both have. That's been huge right to be able to call and say help!"

Teleconferences

"I found the teleconferences to be very helpful with moving forward because I would hear that somebody would try this but that's maybe not the direction you want to go. So that was very supportive in moving the project forward."

(Feedback on Program Resources & Supports continued ...)

The Marketing Materials

“Unfortunately the clings that were given to us we were unable to use in this facility due to that we are not allowed to add anything to the windows, no post, it is a very clean neat building and we were unable to use any of the clings whatsoever. Those that were put up were removed immediately ... We did not use the little card. It was put out and handed out but we still have many remaining...the card with the four different colours and it has a fact on the back and basically it is a way of promoting the Stay Active Eat Healthy website. It was given out but left on the tables after lunch, so that one was not as effective, but all the other resources were great.”

The Stay Active Eat Healthy Website

“The website was great. It provided fantastic background. Particularly of other people’s stories, other people’s ideas and the way other people approached this project”.

“The website was great. The protected area was very helpful.”

Power Point Resources

“I did a PowerPoint, the PowerPoint that’s part of the Stay Active Eat Healthy. It’s a great PowerPoint presentation and it really hit home to people who maybe were sitting on the fence when they saw children sitting laying on the couch. And eating the drinking the big Slurpee in the backseat of the car. It was hard for people to say they were sitting on the fence.”

Supplemental Resources

“So the posters and recipe book are excellent, and we got extra copies of them and distributed them to the concession people and I have one.”

“Overall I think it went very well. I think one of the hardest parts from the BCRPA standpoint is trying to link so many communities in this project and that we’re a dysfunctional province because of how we’re laid out and trying to get everybody on a conference call on the same page is very very tough to do”.

“The Sip Smart program I was able to get a copy of the program and I used it all of the ‘Lunch and Learns’ because it did focus on liquid calories. The ‘Meet Well Eat Well’ pamphlet that was given out I was able to order the full booklet and that was given out to all the major players at each of the meetings.”

Future Supports

Interview Question: What other supports do you need to have in place to support your progress?

Ongoing Dedicated Staff Time

“Ideally there would be one person who through the support of their employer, would be permitted to continue as the Healthy Choice Coordinator for the district. That could be as simple as 4 hours a month. Something where it was a mandate of a particular employee to keep it going because of the size of this operation and facility, and its associated recreation facilities and district offices, it may get lost unless it gets a point person.”

Ongoing Provincial Staff Support

“I would like to see is someone [like the provincial coordinator] ongoing ... I think there still should be a resource person to contact. I don’t know, there will be certain things like the Brand Name Food List will always be there, but it is the personal touch that I think will sorely lacking.”

Funding Support

“If we don’t end up with some money to allocate it or staff to allocate it ...we’ll go slow and steady at it. But if there’s no grants available for us...then this project will slow down. It won’t stop, it will just slow down.”

List of Successful Healthy Choice Products

“What I would love to see a best sellers list of products ... It would be interesting to know what other groups are putting in their vending machines that might be different that I haven’t thought of. Like one of my favourites that I tested at the BCRPA was the seaweed.... I thought it would be nice if there could be posted on the website the top five best sellers in every place.”

Buy-In from the Public

“It has been excellent from the concession leaders, but since the parent group are the ones that are interested I got to get their buy-in completely ... I gotta earn their trust... I am there with the vending, I am there with staff, I just need to get to know all those people I don’t know in the community.”

Supportive Policy

“I think the policy itself ensures it continues on and that we said that we are doing it and we are going to have to follow it because we put it in writing.”

A Province-Wide Opportunity to Share

“And just to have everybody come together ... all of these communities have done their separate piece and especially for communities who haven’t had a chance to share that would be really valuable.”

Evaluation as a Catalyst

Evaluation Objective 4:

To act as a catalyst to encourage and support communities in the planning and process of making sustainable changes.

Feedback on the Evaluation

Since one of the main objectives of the evaluation was to act as a catalyst and support for communities in their change process, the evaluation team made themselves as available and approachable as possible to communities throughout the project. Overall, feedback was very positive. Here are some of the comments that staff made in regards to the evaluation tools and process:

Providing Direction:

"I really appreciated starting with the audit, because it was a brilliant way of giving a template from which we could go from."

Providing Supporting Evidence:

"When you are switching culture, you can't do it fast and you can't lay it down. It has to come from within. [It has to come from the people]. And that is where I keep going back to those surveys and the baseline information. We were providing junk and it was really sobering. It was like "Wow, we are really bad here". So it just gave us that focus to change the tide."

"We needed to go first and foremost to the executive council-so we took the results of the audit, including the vending, the food service and the policy and the supportive environment and we took it directly to the executive, whereupon we were able to get, first of all to alert them to what we were attempting to do with this initiative and also to ask permission to get some staff members to become part of the Healthy Choices Committee."

Capacity Building:

"At the very beginning I got [staff] involved with the vending machine audits, and then that helped them to develop comfort that they could redo the audits again."

Providing the Public an Outlet for Feedback:

"It was helpful, especially when it came down to the vending machine evaluations. We did do a good survey of our public, and one of the best ones we did is we have a email list for our clients at the pool...at our rink and we emailed out to all our clients saying we're looking at your input back on healthy food and beverage. So we got a really good response back to that survey."

"Plus all the surveys I did last fall were just awesome. They said that parents wanted healthy foods. And they were very upset how the concession was being run in the last couple of years."

Providing Staff an Outlet for Feedback:

"[This interview] is a good format right now to get that to let me express [my] concerns. You have record of that from other communities as well."

(Feedback on the Evaluation continued ...)

Support from the Evaluation Coordinator:

"[The evaluation coordinator was] there any time I needed [her] ...very approachable, very encouraging, very resourceful ... [she] led me to things I wouldn't have done otherwise."

"[The evaluation coordinator] was very helpful and very quick to respond when I had questions so that was great."

"Talking to [the evaluation coordinator] a lot was very beneficial for me anyways. Because [she was] always very excited and supportive as well. And so, because I know we have had quite a few conversations and that was very helpful for me because I got pumped when I talked to [her]! So that was key."

"Thank-you for your support. I want to thank [those who] initiated the science behind the healthy food. Because people give a philosophy but you don't always have the science and all the methodology to lay it down into the real world. We may value healthy food, but having a tangible process that we can follow that shows improvement. ...This was bang on. This gave me the tools, including support from [the evaluation coordinator]. A really positive experience from my point of view."

Ongoing Monitoring for Sustainability:

The evaluation tools that were give to the communities were also something that communities had incorporated into their future plans to help to keep the project outcomes sustainable and to support ongoing development.

"I have suggested to management that the [municipality] conduct another patron and vending evaluation in late fall when a more accurate measure can be completed."

"Another concern I had for future success was the assessment of both the food services and the vending machines ... two months down the road when nobody's really checking what is going to happen. So it was agreed that management, so superintendant at each facility would be responsible [to evaluation] bi-annually."

"I really was quite opinionated about making sure we have some follow-up audits and not even just in the fall, it needs to be if we want to really be behind this project it has to be an ongoing thing forever."

"Then the follow-up surveys again in February so that we are asking them one final time "are we there?". And then maybe even next year, maybe it will be a twice a year, or once a year, that we just keep coming back in February before we're closing down and ask how we are doing."

"The work should never be done. It should always be ongoing ...trying to keep improvement. Keep meeting with people and taking their suggestions to heart... not to slipping back to old habits, because that can easily happen ... we need to have the patrons that come here, get them excited about the new choices that will be available."

~Recreation Staff

Summary

The eleven communities involved in Phase III & IV of the Healthy Food and Beverage Sales project made important progress towards improving provision and promotion of healthy foods and beverages. Facility Assessment Scores showed significant development in strategic planning, creating supportive environments and communication and education across 19 facilities impacted by the project initiatives. Healthy eating committees were established and plans, policies and monitoring processes were established to support ongoing change towards healthy eating environments. Seven of the eleven communities were able to make important policy developments. Three municipalities formally adopted a healthy eating policy, all of which had a 2-3 year phase in strategy. Of the seven concessions that were assessed, a total of 38 assessment areas showed improvement towards healthier offerings and preparation methods. On average, there was a 27% increase in healthy choice vending products in the 31 machines audited across 20 facilities. Three of the eleven communities were able to make major changes in vending product offerings, the most successful change seeing a 56% increase in healthy choices according to the BC Provincial Guidelines. Patron surveys showed that the average facility user supports an increase in healthy eating choices and noticed an increase in healthy eating promotions between the beginning and end of grant cycle participation.

Overall feedback was that the support, resources and evaluation process provided by the HFBS initiative accelerated the process of change and sparked discussion among all stakeholders, including patron groups, facility staff, industry members, and local decision makers. Communities discovered that making changes to food & beverage selections in pre-established venues is a complex and challenging endeavor that requires determination, patience, partnership, education, commitment of resources and plenty of time. All Phase III & IV participating communities plan to continue the process of change and work towards establishing healthier foods and beverages in their municipal recreation facilities, programs and events.

“I think it’s been a fabulous initiative. I think it’s something that’s been long overdue in communities. And so it has been exciting to be a part of it ...To be able to share in this kind of grass roots movement toward healthy eating for me really exciting because it’s something I feel really strongly about in my own personal life so it’s easy for me to be passionate about it because I really care about it.”

~Recreation Staff