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A Programmatic Audit of the Massachusetts Vitamin Litigation Project Final Report

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A Programmatic Audit of the Massachusetts Vitamin Litigation Project Final Report

January 2007

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Executive Summary

The Massachusetts Vitamin Litigation Project resulted in the 2002 partial settlement of a class action lawsuit brought by the law firm of Ellis and Rapacki on behalf of residents of the Commonwealth who purchased indirect vitamin products¹ during the period from 1990 through 1999. In return for the release of claims, the defendants (a group of pharmaceutical manufacturers) agreed to pay a settlement amount of more than \$19 million to be allocated to charitable organizations providing food and nutrition programs in Massachusetts. An additional \$2.5 million in settlement funds was subsequently approved.

A total of 572 grants ranging from \$1,000 to over \$2.4 million were awarded to Massachusetts organizations in three waves: November 2002, June 2003, and December 2003. Of these projects, most (279) used their funds for capital improvements, 161 for a programmatic component, 127 for food purchases, and 3 for research. The large proportion of funding for capital improvement projects was intentional. As the settlement money constituted a one-time opportunity to strengthen organizations that address hunger and nutrition needs across a variety of populations and locations in Massachusetts, the law firm of Ellis and Rapacki was particularly focused on building capacity and increasing the sustainability of these programs. To this end, Ellis and Rapacki considered not only the immediate and direct need for food, but also the - often neglected - infrastructure that is a backbone of aid efforts in general. By replacing failing equipment, providing vans to deliver food, building shelves, adding freezers, improving access for the physically challenged, the hope was to positively impact the ability of aid organizations to do their work now and in the future.

The Center for Social Policy was selected by Ellis & Rapacki and approved by the Court to conduct a programmatic audit of the Vitamin Litigation Project. The audit was a process study that served two key functions. First, the audit served a descriptive function, portraying to the Massachusetts Superior Court what happened in the funded projects for purposes of accountability. Second, the study served an evaluative function by documenting lessons learned regarding the implementation and perceived outcomes of food and nutrition projects. The audit focused only on projects with a programmatic component and did not include projects focused exclusively on capital expenditures or food purchase.

The audit had two major components. The first was the collection and analysis of reports from the funded projects. All grantees were required to submit to Ellis & Rapacki final reports responding to five questions in the Associated Grantmakers Common Report Form, and the vast majority of projects complied.

¹ “Indirect Vitamin Products” refers to a vast number of products, such as breakfast cereals, bread, baby food, margarine, vitamin tablets, drinks, and cosmetics that are enriched with vitamins that were not purchased directly from the vitamin manufacturers.

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The second component of the audit was site visits with a subset of 45 of the funded projects, which included interviews with the directors of the organizations and/or key program staff. The site visits were conducted between October 2003 and January 2005 and occurred during various phases of program implementation, mostly six to nine months after grant receipt.

Report Summary

This Executive Summary presents the key findings from the audit, including the accomplishments of the projects, setbacks, additional funding received, steps to ensure sustainability of the projects beyond the grant period, and the effects of collaboration with other organizations.

The organizations funded through the Vitamin Litigation Project have responded to basic and immediate needs of their target audiences by providing them with food.

There were two major types of food provision: food itself and food vouchers. The projects providing food directly to individuals or families did so in two ways: through food pantries and/or through free meals, such as community suppers.

Funded organizations also implemented programs to promote nutrition and exercise, in an attempt to prevent disease and death. Projects addressed diseases ranging from osteoporosis to obesity. Education projects delivered nutrition and other types of education in a variety of ways, including through classes, workshops, and one-on-one sessions. Some of these involved cooking, while others involved education outside of the classroom, for instance, food shopping expeditions. The funds for education projects were used to develop the education content, in some cases a curriculum, as well as to purchase or produce materials. The content of the nutrition education varied and included general nutrition education, skill development, practical information, and nutrition as it related to medication.

Agencies used the grants to develop new programs and/or to enhance existing programs. Most of the food provision projects were enhancements of existing programs, whereas the nutrition education projects were split between enhancements and new projects. Whether a project was new or an expansion did not appear to be associated with the amount of award or type of project – provision or education.

Despite some challenges, most project directors reported that their projects had some impact on their proposed target population. Project reports and site visits gave some indication of the size and/or scope of the goods and services produced or delivered by the program. However, lack of evaluation measuring project outcomes limits the conclusions that might be drawn about the outcomes of the projects. Outcomes perceived by projects included changes in the behavior of program participants, improved skills, changes in knowledge, and gains of a social nature.

Most projects used cost-saving measures. These included traditional cost-saving measures, such as donations and in-kind contributions. Directors also mentioned low rent, use of volunteers, and carrying out certain activities or services in-house.

Based on information provided in project reports, sixty percent of audited projects experienced delays in meeting their project objectives. The most common delay was in hiring staff, particularly for the project manager/coordinator position. Several projects acknowledged experiencing “typical” challenges faced by community-based initiatives, including those posed by the target audience. In all cases, program participation or service utilization was voluntary, posing challenges in recruitment and retention.

Based on information provided in final project reports, eighty-six percent of audited projects took steps to secure additional funding. However, the audit occurred before funding from the grant had expired, so the projects were not assessed at the critical point of sustainability. Rendering a sound verdict on sustainability would require follow-up with the programs to assess how many are still operating and to what extent, after initial funding.

Based on information provided in final project reports, sixty-eight percent of audited projects received funding in addition to the Vitamin Litigation Grant. Common sources of additional funds were Project Bread and FEMA.

Partnerships were critical to programmatic success. The major effects of collaboration included raising awareness of the projects and increasing culturally appropriate outreach into the target communities, ensuring that the projects had necessary expertise, and providing donations and other cost-savings.

Lessons Learned

The process audit of programmatic grantees’ reports and our site visits resulted in lessons learned regarding the implementation and perceived outcomes of food and nutrition projects. We offer broad recommendations based on these lessons learned. To the extent that the projects are representative of food and nutrition programs statewide, or nationally, these considerations might be generalized to a broader context.

Food provision programs should endeavor to dispense nutrition information along with food. Nutrition problems stem not only from lack of food but from improper diet as well, and food provision does not ensure sufficient nutrition. Nutrition information can be especially useful to low-income households accessing food through pantries, free meals, and vouchers, to help them use their food resources wisely. Mechanisms for providing nutrition information may include flyers in grocery bags and printing information on the bags.

Sufficient start-up time for projects like these should be incorporated into programmatic plans. Among other activities, start-up time must allow for recruitment and/or training of staff, building relationships with partner organizations, securing appropriate sites for programs, developing materials, and careful planning of the ensuing

implementation of the program. One way to ensure the appropriate acknowledgement of start-up time is to include it as an activity on the project time line.

When applying for grants, programs must be realistic about what can be accomplished in a given time frame. Ambitious plans are not always feasible in a short time frame, and we know that most projects experience delays in meeting their objectives. This is especially important given that programs are often judged against the goals and objectives outlined in their original grant proposals.

More planning and better strategies are needed for recruitment and retention of program participants. It should be clear which individual(s) in the organization are responsible for recruiting. The recruiting individual(s) should be known to the target audience, should have in-depth knowledge of the program, should use a standard recruiting protocol, and should receive training. In addition, transportation and/or child care should be covered for program participants, if at all possible. Finally, we recommend some sort of inducement or incentive for participants to attend the program.

Collaboration should be considered a key part of food and nutrition programs. Collaboration improves planning and implementation, helps to prevent duplication of efforts, and opens up access to target populations. It also allows the transfer of knowledge and skills across organizations, which is likely to have long-term benefits.

Evaluation is necessary in order to better understand project effectiveness, link project activities to outcomes, and improve projects. Lack of evaluation limits the conclusions that might be drawn about the outcomes of the projects. Whenever possible, we recommend that projects work with an external evaluator. Project evaluations should have clear evaluation questions related to the goals of the project, and research designs appropriate to the evaluation questions.

Consider overarching criteria against which to judge the success of a group of funded projects. This distribution gave organizations latitude to propose unique projects that leveraged their existing expertise, operations, and partnerships. As a result, there was no one model of food provision or nutrition education, and no specific goals governing the settlement distribution as a whole.

In summary, the audit confirmed that the settlement achieved in large part what its designers intended: to assist people throughout Massachusetts with a variety of food and nutrition needs. Especially encouraging is the high number of projects that had taken steps to secure additional funding, a vital step toward sustainability. Future similar projects would benefit from the recommendations described here.

Introduction

The Massachusetts Vitamin Litigation Project resulted in the 2002 partial settlement of a class action lawsuit brought by the law firm of Ellis and Rapacki on behalf of residents of the Commonwealth who purchased indirect vitamin products² during the period from 1990 through 1999. In return for the release of claims, the defendants (a group of pharmaceutical manufacturers) in the lawsuit agreed to pay a settlement amount of more than \$19 million to be allocated to charitable organizations providing food and nutrition programs in Massachusetts (<http://www.vitaminlitigation.com>, 8/20/02). An additional 2.5 million in settlement funds was subsequently approved.

The availability of these funds for food and nutrition programs was timely. Issues of food insecurity³ and hunger, the growing prevalence of obesity among both adults and children, and the high incidence of juvenile diabetes were and continue to be increasingly the focus of attention both nationally and in Massachusetts. Food insecurity and hunger are reported prevalent in close to 8% of Massachusetts households.⁴ In the highest geographic concentrations of poverty in the state, the rate of food insecurity was found to be three times greater than the state average, and the rate of hunger was four times greater than state average.⁵

Increasing rates of obesity in Massachusetts mirrors national trends. Currently one out of every two Massachusetts adults is either overweight or obese, and 25% of high school students are overweight or at risk of being overweight. Concern with this problem led to the formation in 2003 of the Massachusetts Partnership for Healthy Weight to build partnerships and collaborations with other chronic disease programs to provide advocacy, assessment, education and training. Thus, the infusion of funding from the Vitamin Litigation Project available for organizations to address these serious problems was both timely and eagerly welcomed.

Announcement of the funding availability appeared in newspapers throughout the Commonwealth, inviting organizations to submit proposals. Additionally, notices were circulated among related state agencies, such as Departments of Public Health and Education, and informal contacts were made to some large agencies. An advisory committee of leaders in the nonprofit sector assisted Ellis and Rapacki in reviewing proposals and selecting the final grantees. A total of 572 grants ranging in amount from

² “Indirect Vitamin Products” refers to a vast number of products, such as breakfast cereals, bread, baby food, margarine, vitamin tablets, drinks, and cosmetics that are enriched with vitamins that were not purchased directly from the vitamin manufacturers.

³ According to the Food Security Institute, Center on Hunger and Poverty, Heller Graduate School of Social Policy and Management, Brandeis University: “Food insecurity occurs whenever the availability of nutritionally adequate and safe foods, or the ability to acquire acceptable foods in socially acceptable ways, is limited or uncertain. Hunger is the uneasy or painful sensation caused by a recurrent or involuntary lack of food and is a potential, although not necessary consequence of food insecurity.”

⁴ Food Security Institute, 2002.

⁵ *Massachusetts Hunger Assessment*, 2003.

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\$1,000 to over \$2.4 million were awarded to Massachusetts organizations in three waves: in November 2002, June 2003, and December 2003.

The organizations funded through the Vitamin Litigation Project have taken a lead in intervening on behalf of food insecure (or potentially insecure) individuals and families in the Commonwealth of Massachusetts, responding to the basic and sometimes immediate needs of their target audiences by providing them with food. More than 160 of these organizations planned to utilize their grants for a range of programmatic approaches to either food delivery or nutrition education or both. The remaining grantees were allocating their awards solely for equipment, capital expenditures, or food purchases.

Methodology

The Center for Social Policy was selected by Ellis & Rapacki and approved by the Court to conduct a programmatic audit of the Vitamin Litigation Project. The audit was a process study that served two key functions. First, the audit served a descriptive function, portraying to the Massachusetts Superior Court what happened in the funded projects for purposes of accountability. Second, the study served an evaluative function by documenting lessons learned regarding the implementation and perceived outcomes of food and nutrition projects.

A total of 572 projects were funded in the three waves. Of these projects, 279 used their funds for capital improvements, 161 for a programmatic component, 127 for food purchases, and 3 for research (see Table 1 below).

Table 1: All Funded Projects

	Number of projects	Percent of projects
Capital improvement	279	49%
Programmatic	161	28%
Food purchase	127	22%
Research	3	1%
Other	2	<1%
Total	572	100%

The audit focused only on projects with a programmatic component and did not include projects focused exclusively on capital expenditures or food purchase. The audit had two major sources of grantee information. The first was the collection and analysis of reports from the funded projects. All grantees were required to submit to Ellis & Rapacki final reports responding to five questions in the Associated Grantmakers Common Report Form. In addition, many projects submitted interim reports. The second component of the audit was site visits to a subset of 45 of the funded projects, conducted between

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October 2003 and January 2005, and occurring during various phases of program implementation, mostly six to nine month after grant receipt.

To select a representative sample for site visits and allow for variability among projects, projects were grouped by funding amount. Then, within each funding group, projects were selected based on the location of the program to allow for the widest geographic representation possible, and program target populations to include the variety of populations served by the grants. See Appendix A for a list of all projects visited.

In most cases, the site visit interview informants were the project directors. In some cases, additional project staff participated. Each interviewee was informed about the purpose and content of the interview, and signed a consent form before the interview began. The interview protocol contained 13 questions on project processes and outcomes, and took approximately one hour to administer.

Information gathered in the final reports as well as in the site visits was analyzed in a software package for qualitative analyses (NVIVO). Quantitative data were analyzed in SPSS. The quantitative results are tallied (i.e. the number of respondents who fit into a given category) and reported as percentages in this report. For questions where respondents provided actual numbers as a response, such as the number of people served, the data are typically presented as averages.

Project Site Visit Results

Forty-five site visits were conducted to a variety of programs that used the litigation grants for **food provision** and **education** projects. Fourteen of these projects provided food, while the remaining 31 focused on nutrition education. Projects did not fit exclusively into one of these two categories. Most of the education projects also provided food to their beneficiaries; however, in most cases the food provision was secondary to the education focus. While some of the food provision projects provided only food, others provided food along with other services, including health and social services.

Interviews with project directors explored both project process and outcomes, focusing on seven key areas:

1. project descriptions, including project activities, goals, target audience, challenges,
2. project development,
3. funding, how directors heard about the funding opportunity and their reasons for applying,
4. cost-saving measures,
5. perceived project impact, including evaluation efforts, and
6. sustainability.

This section of the report describes the interview results, organized according to the above areas.

Food Provision Projects

The U. S. Department of Agriculture, the National Center for Health Statistics, professional journals, physicians' groups, and community agencies have documented and urgently called for a response to the tragic problem of food insecurity and hunger in the United States.⁶ Millions of Americans, nearly half of them children, simply do not have access to enough food to meet their basic needs. In Massachusetts, an estimated 8% of households are food insecure.⁷ Further, an estimated 20% of children in the Commonwealth below the age of 12 live with food insecurity or hunger, and this rate increases to 33% in low-income communities.⁸ Lack of this basic requirement has profound negative implications for human development, chiefly health and education.

⁶ Source: Recent Studies on Hunger in the United States. On the Food Research and Action (FRAC) web site at http://www.frac.org/html/hunger_in_the_us/hunger_studies.html

⁷ Source: Massachusetts Nutrition Board. (2004). Health of the Commonwealth: Nutritional Status of Massachusetts Residents. Massachusetts Department of Public Health, Bureau of Family and Community Health.

⁸ Source: Project Bread. (1998). Hidden Hunger, Fragile Futures: A Report on Child Hunger

This section of the report describes their food provision efforts.

Type and Mechanism of Food Provision.

There were two major types of food provision: **food** itself (ten projects) and **food vouchers** (four projects). The projects providing food directly to individuals or families did so in two ways: through **food pantries** (five projects) and/or through **free meals** (five projects), such as community suppers. There also were instances of organizations adding food provision to their existing services, for instance, the Colonel Daniel Marr Boys and Girls Club in Dorchester started a Kids' Café.

At the food pantries visited, beneficiaries pick up uncooked food items – usually prepackaged canned goods but sometimes perishable items. In some cases, decisions about the food provided were made according to guidelines, such as those of the Greater Boston Food Bank. Food pantries typically distribute food during limited hours, but some allow beneficiaries to schedule prearranged times to visit. Most food pantries obtain their food from the private sector, supplemented by federal funds. National data indicate the important role that food pantries play in hunger prevention. In 2002, more than 4 million non-elderly low-income families, most of them with children, had used a food pantry at least once in the previous year.⁹

Free meals provide people with cooked meals free of charge at locations, such as soup kitchens and shelters, some with religious affiliations. Many meal-providing organizations operate on a daily basis. Providers sought to deliver hot, well-balanced meals.

Food vouchers are an alternative means of increasing food security. Food vouchers are printed certificates exchangeable for food at a prescribed amount. They must usually be exchanged in full at one time at particular stores, and do not allow the recipients to make

VOUCHER INTERVENTION

Through the Great Brook Valley Health Center in Worcester, Massachusetts, the vitamin funds put vouchers for fruits and vegetables in the hands of low-income Hispanic and Brazilian immigrants. Vouchers were used to encourage fruit and vegetable intake, as well as to motivate a hard-to-reach population to visit the Center. For agencies seeking to implement a voucher program, the Center's process offers several lessons learned. First, bring in participating store representatives early to discuss the procedures for honoring and tracking vouchers, print expiration dates on the vouchers, list items that cannot be purchased on the back of the voucher, and visit participating stores on a regular basis to monitor the program.

multiple visits with the same voucher. Two of the four voucher projects provided emergency assistance; the others were not crisis-oriented and instead issued vouchers (or in one case farm shares) specifically for fresh produce.

Two of the projects had the goal of promoting and increasing utilization of Food Stamps. The Food Stamp Program is a federally funded program administered by State and local

⁹ Source: Urban Institute. Snapshots of America's Families. Many Families Turn to Food Pantries for Help.

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welfare offices. The program is targeted to low-income households, with the goal of helping them buy food via an Electronic Benefits Transfer (EBT). In addition to promoting Food Stamp Program participation, one project facilitated direct certification for free or reduced-price school meals for students.

Goals

The goals of the food provision projects were quite straightforward: to provide clients with food to prevent hunger. However, project goals also extended beyond physical health (material support) to include emotional health (moral and emotional support), as signified in the following quotations:

“The food and nutrition program serves a key function by meeting a basic need. With this basic need met, members are able to turn their attention to primary and mental health care, HIV prevention, as well as their own development.”

These agencies and their collaborators were concerned with their clients’ dignity. They strove to create a sense of community support for the clients, stressing the idea of a “hand up” rather than a “handout.” They wanted their clients to feel respected, to reach their potential, to be productive citizens, and to achieve some measure of independence and stability in their lives.

In addition to their client-oriented goals, most of the projects had the goal of improving or enhancing their own services, or building their capacity to increase individual and family access to food. As one director explained,

“With the infusion of the grant funds, the Pantry’s goal of responding to every reasonable request for assistance is being accomplished.”

Examples included improving the efficiency of a particular program component, or of operations in general, and expanding schedules to offer services more frequently. One project had the goal of demonstrating best practices regarding food provision.

Beneficiaries

The food provision programs generally did not require applications, nor did they have eligibility criteria. By nature, the food provision projects tended to serve more vulnerable populations than the education projects (described in the following section of the report). Beneficiaries were people in need of food assistance who could not otherwise provide for themselves, either for financial or physical reasons, and who were experiencing or at risk for hunger and other nutritional problems. Target populations of the food provision programs included the homeless and the poor, and special population subsets such as persons with substance abuse problems, the sick and frail elderly, clients who speak a language other than English, individuals with special dietary needs, and Native Americans. Two of the 14 food provision projects specifically targeted school-age children. One of these directors explained:

“The concept is simple: child hunger prevention should be seamless and invisible; children should receive nutritious food where they live, learn, and play.”

The scope of projects’ beneficiaries depended upon the type of organization administering the project; food pantries were larger in scope in that they served the general public,

while other organizations had narrower target audiences, such as urban children attending a Boys and Girls Club. However, the project’s scope did not necessarily correlate with the

“MEALS ON WHEELS” RADIO COMMUNICATION PROJECT

Springwell, Inc. of Watertown, Massachusetts was in the business of delivering nutritious meals to homebound elders who were unable to prepare their own. However, the organization had lacked the funds to establish a communication link between the drivers and the dispatcher at the agency. The grant enabled drivers to be equipped with cell phones. Now, when an elder fails to respond to a meal delivery, the driver contacts the dispatcher at the agency who places a call to the house to ensure the elder is well and can come to the door to receive the meal. In this way, meals did not go to waste.

size of their target audience. For example, some focused projects actually served larger numbers of clients than food pantries serving the general public.

Project Challenges

Several of the project directors interviewed reported no challenges in reaching their target populations. As one director stated,

“Clients in crisis either know about the agency or are referred by any number of social service agencies.”

Moreover, some directors saw no *new* (or unexpected) challenges associated with their grant activities since most of the food provision projects were expansions or enhancements of existing projects rather than new projects.

A couple of projects experienced challenges brought about by the economy. For example, one director of a project in Acton referred to higher gas prices preventing some clients from driving to receive food or meals. Another project that featured meals as part of a summer camp program ran into trouble when the state cut funding to the summer camp. Two projects mentioned partnership challenges. One project was challenged by the limited capacity of their partner due to the small size of the organization and ultimately selected a partner with greater capacity. Another simply had trouble finding suitable partners.

Other challenges associated with individual projects included:

- *Possible stigma associated with receiving services or assistance.* At least one project considered this in their start-up phase and thought about how to be sensitive to and reduce stigma for beneficiaries.
- *Inadequate infrastructure for service delivery.* In one case, the Department of Education paid for meals for children from low-income families, but the schools were not equipped to handle meals.
- *The target population itself.* Issues related to addiction and relapse when former substance abusing program participants dropped out of programs due to using.
- *Staffing.* In particular, finding dependable and consistent staffing was difficult for a number of programs.
- *Increased numbers.* Increased numbers at food pantries prompted stricter procedures for checking inventory and necessitated appointments during peak periods.

Education Projects

“Preventative health has traditionally, both nationally and at the state and local level, been de-prioritized in times of fiscal strain when weighted against issues considered more critical.”

Research indicates that three-quarters of Americans do not eat enough fruit, more than half do not eat enough vegetables, and two-thirds eat too much saturated fat.¹⁰ In Massachusetts, approximately one-third of adults do not consume the recommended amount of fruits and vegetables, and the rate is even higher for adolescents. In addition, approximately two-thirds of women in Massachusetts do not take in the recommended amount of daily calcium.¹¹ Making matters worse, physical inactivity often accompanies nutrition deficiencies. In Massachusetts, 83% of adults and 38% of adolescents do not meet the recommended level of physical activity.

These nutrition deficiencies have been linked to disease, and in the extreme they can result in death. Massachusetts has seen a 60% increase in adult obesity since 1990, as well as an increase in the proportion of low birthweight babies (from 5.8% in 1990 to 7.2% in 2001). In response to these concerns, organizations across the country are engaged in designing and implementing programs to promote nutrition and exercise, thereby preventing disease and death. The central state-funded program addressing nutrition is the Massachusetts Women, Infants, and Children Supplemental Nutrition

¹⁰ Source: U. S. Department of Health and Human Services. (2003). Promoting Healthy Eating and Physical Activity for a Healthier Nation. In Prevention Strategies That Work: <http://www.healthierus.gov/steps/summit/prevportfolio/strategies>

¹¹ Source: Massachusetts Nutrition Board. (2004). Health of the Commonwealth: Nutritional Status of Massachusetts Residents. Massachusetts Department of Public Health, Bureau of Family and Community Health.

Program (WIC). Families participating in WIC receive cash assistance and vouchers for food, as well as regular nutrition counseling.

Education programs comprised two-thirds of the projects funded by the vitamin litigation settlement. Projects

addressed diseases ranging from osteoporosis to obesity.

Education projects delivered nutrition education often embedded in other types of training (e.g. general health, food preparation, workforce) in a variety of ways, including through

classes (single classes and series), workshops, and one-on-one sessions. Integrated into most nutrition education programs were other related activities, such as cooking or food shopping expeditions. The funds for education projects were used to develop the education content, in some cases a curriculum, as well as to purchase or produce materials. The content of the nutrition education varied and included general nutrition education, skill development, practical information, and nutrition as it related to medication.

LAWRENCE COMMUNITY ACTION COUNCIL

In Lawrence, the 23-year veteran WIC director's dream of providing books to infants and children during nutrition counseling sessions became a reality with the grant from the vitamin settlement. The funds allowed the agency to purchase nutrition-related books and use them as vehicle for communicating with clients about food and nutrition issues, such as breastfeeding, introducing solid foods, and snacks. At the same time, the agency used the book distribution to promote reading. The Lawrence project could serve as a model for incorporating family literacy/reading into WIC nutrition sessions.

Sometimes education was provided alone; other times it was combined with or embedded in other forms of education or services, such as general health education, physical education, nutrition assessments, etc. Still other times, the grant provided for materials to enhance an existing education component, for instance, books about nutrition. In some projects, the education took place at one central location, whereas in other projects it was more widespread. For example, the Federation of Massachusetts Farmers' Markets provided educational information at about 40 markets around the state.

Goals

A number of directors described their program goals by providing a description of their project activities (e.g., to establish a program, to distribute books), rather than a description of what they wanted to accomplish or change, including intended outcomes for program participants. Nevertheless, education was usually the objective of a broader project goal. For instance, teaching children in the Shapedown Program at Bay State Medical Center about nutrition had the end goal of decreasing obesity. The range of objectives of projects included the following:

- Skill development – independent cooking skills (e.g., chopping, cutting), personal finance skills (e.g., food budgeting)
 - with the goal of independent living, safety, use, preparation
- Changes in behavior – type of diet, level of physical activity

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- Increased knowledge – of nutrition, other health issues (osteoporosis)
- Improved attitudes – about healthy eating, ability to care for self
- Improved health – increased physical exercise, decreased obesity

Beneficiaries

In contrast to the food provision projects, which served anyone in need, the education projects selectively targeted and recruited their beneficiaries. Still, these projects served a wide range of individuals and communities, including low-income, racial/ethnic minorities, and special needs populations, ranging in age from infants to the elderly. Most projects served a racially diverse audience. Some programs included their own staff among their intended beneficiaries. Even for the programs with an educational focus, the program participants were not always a set, stable group.

VETERANS TRANSITION PROGRAM

At the Veterans Northeast Outreach Center in Haverhill, Massachusetts, the vitamin grant gave food and meal preparation a place among the independent living skills taught to homeless veterans making the transition into independent permanent or supportive living. In individual-based training sessions, veterans were taught the use of kitchen appliances, safety, food preparation, food presentation, food storage, and nutrition. Some of the veterans had not prepared meals in years, and the program gave them an opportunity to relearn skills and information and have fun.

Perceived Impact in Project Participants

“Without the grant we would have not realized the need that is out there to train people to be able to feed themselves more nutritiously. People now understand more about different types of food, and people make use out of things they would have not touched before.”

A number of project directors described changes in their project participants in four main areas. First, directors described behavior changes. These included healthier diets, reading food labels, cooking instead of eating out, shopping at different markets, and increased exercise. A handful of project directors believed their projects had resulted in improved health outcomes for participants, such as weight loss.

Second, changes in participants included improved skills, namely cooking and food preparation skills. In addition, math skills were acquired through shopping on a budget, and measuring during cooking activities. Reading and writing skills were gained through activities such as creating a cookbook. Comments from directors suggest that the interdisciplinary nature of projects, in particular, augmented such skill development.

Third, directors reported changes in knowledge, primarily knowledge related to making better food choices, such as reasons why fast food is not a good option or investment.

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Directors perceived that these types of changes were accompanied by increased self-awareness that then led to behavioral changes. Projects that worked with parents helped re-educate them about assumptions they make about what their kids will eat and changing the messages they give their kids about food and nutrition. In addition to gaining knowledge related to food and nutrition, directors also described their projects as opportunities for participants to learn other simple health messages.

“At the completion of the classes for homeless families and families enrolled in Head Start, parents were better informed of the food pyramid. They understood the nutritional concepts as they applied to the meals that were prepared for the program. They learned how to prepare the meals demonstrated in the program.”

Finally, other gains for participants were of a social nature, for instance, directors commented on how activities helped break down barriers and enhance communications between participants and staff and promote interaction and support among participants. This appeared especially important to projects that worked with seniors who otherwise might be very isolated socially.

Perceived Impact on Food Provision

Many directors focused on food provision as the major service/benefit to the project’s target population, providing simple explanations such as,

“The objective of enhancing and improving the nutritional value of food supplies available for distribution has been met. Consumers now have access to a greater variety of foods that include fresh and frozen items.”

The accomplishment of providing food was all the more deeply felt in light of the decline in the economy. As one director summed up,

“Although the demand for food has increased with the economic downturn, we have not had to turn anyone away nor have we had to decrease the quality or quantity of food distributed.”

The major form of enhanced food provision was the addition of fresh produce (fruits and vegetables) to pantries, meals, or voucher programs. Other types of food provision included more proteins/meat products, and the addition or improvement (nutritionally) of snacks to existing programs.

Directors stressed the element of increased choice clients had as a result of the introduction of new foods. Importantly, several directors commented on how changes in food provision to include healthier foods seemed to have an impact on participants’ attitudes about food, for instance, changing clients’ attitudes that fruits and vegetables are too expensive to buy. In addition to direct food provision, a couple of projects reportedly increased the number of clients receiving food stamps, with descriptions such as,

“Programs substantially increased their food stamp advocacy work, thanks to the Massachusetts Vitamin Litigation Fund grant.”

Perceived Impact on Community/Institutional Changes

A few directors described broader impact of their programs on communities or institutions. In the words of one director, *“This has become an important part of our overall program. The vitamin funding had tremendous impact beyond its amount.”* The Cape Cod Healthcare project, for instance, felt the best outcome of the grant was the momentum it created toward improved nutrition in the school. Examples included educating the principal that the healthier kids eat, the more Title I funds they receive, removing soda machines from the school, re-opening the restaurant in the after school program, and changing school policy so that students were dropped off in the morning at the cafeteria, which encouraged them to eat breakfast.

Another example was the Mattapan project, which worked with local health center staff and constituents and hosted a local event providing health food options, education, and community building. The director reported that this event helped to build momentum in the neighborhood for local community networks to work together to disseminate nutrition health information and fight the nutrition health crisis in this community. An example of institutional change is found in Project Bread, in which data exchange took place between public schools, DTA, and WIC.

Project Challenges

Our interviews and observations indicated that projects faced a number of challenges. Several projects acknowledged experiencing “typical” challenges faced by community-based initiatives, including challenges posed by the target audience.

In all cases, program participation or service utilization was voluntary, which meant programs faced challenges related to recruitment and retention. This included low response to direct appeals to participate, as well as a low rate of referrals from other agencies. Some sites used a small incentive (e.g., a small amount of money, a book) to encourage participation. Where beneficiaries were a captive audience, recruitment and retention was less challenging. Community participation or lack of buy-in from key stakeholders also was challenging. Similarly, conducting follow-up with families was difficult.

Projects also faced other challenges related to their target audiences. Serving diverse audiences, such as children of different ages, or typically developing and developmentally delayed beneficiaries, presented difficulties. Moreover, responding effectively to the challenges posed by a wide ranging target audience required resources, for example space, to accommodate different audiences. Other challenges included adapting project content or materials appropriately to beneficiaries with low literacy levels, lack of transportation for participants, and, for projects working with youth,

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behavior management issues. For beneficiaries who received more than one service from an organization, coordination of the services became challenging.

In addition to these common challenges, projects faced their own unique challenges. For example:

- One statewide project mentioned the difficulty of being headquartered in Boston instead of being more centrally located.
- One project that wanted to expand its nutrition education to after school programs encountered opposition from the union that provided food to the schools.
- One project that relied on technology had problems with software.

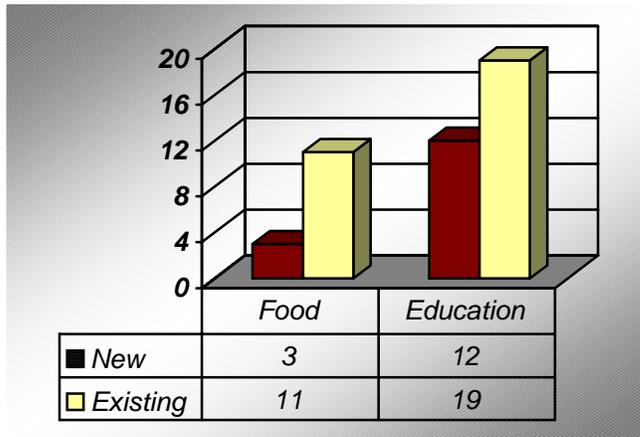
Institutional challenges included structural difficulties, such as incorporating a new component into an existing program, and staffing issues, including training staff to incorporate new practices into their current work, and staff turnover, particularly among volunteers.

Finally, projects faced challenges related to the policy climate, namely state budget cuts as described earlier, trying to reach their goals with fewer resources. Another policy challenge was the Health Insurance Portability and Accountability Act (HIPAA) that went into effect in 2003, requiring attention to more regulations and more paperwork.

Program Development for all Visited Projects

Agencies used the grants both to develop new programs (n=15) as well as to enhance existing programs (n=30). Most of the food provision projects were enhancements of existing programs, whereas the education projects were split (about 60/40) between enhancements and new projects, respectively; see Figure 1.

Figure 1. New and Existing Projects, by Food Provision and Education



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Only three of the new programs were food provision projects: the Great Brook Valley Health Center's voucher program, the Kids' Café at the Colonel Daniel Marr's Boys and Girls Club, and the Community Involved in Sustaining Agriculture's FarmShare program.

Development of new programs included identifying or clarifying the need for the program, building on their own or others' experience with similar programs. For instance, the Colonel Daniel Marr Boys and Girls Club in Dorchester learned from kids' cafes at clubs in Fall River and Allston. New program development also encompassed identifying and building partnerships, planning the program activities, and recruiting project participants (mostly for the education projects).

The process of recruiting participants for education projects varied depending on the agencies' and partners' current relationships with their target audiences; some agencies needed to advertise for and more actively recruit participants, while others did not, as illustrated in the comments below. Recruitment strategies ranged from flyers to advertising in newspapers.

"[We] did not really need to advertise to get participants since [we] already had relationships with youth organizations."

"In order to have our greatest impact, and in light of funding realities, developing collaborations has been a priority. We have collaborated with a wide variety of organizations in nearly all aspects of the program."

"The process of collaboration at times became a dance of finding ways of assisting collaborators with their work and then slowly introducing mutually beneficial objectives."

In 16 projects, agencies used the grant in part to fund new staff (or consultant) positions. Project Bread, the largest grant recipient, was an extreme example, creating a total of 8.5 full-time positions through their grant. In other projects, the agencies used the grant to maintain or supplement the salaries of existing staff.

New staff positions included directors or coordinators for new projects or new components of existing projects, registered dietitians, nutritionists, and cooks. In one case, the projects had used funds to hire local students to help with data entry. The new hires were not necessarily full-time positions, and at least one project director noted the challenge of trying to hire for a part-time position.

New staff were generally hired for their food/nutrition expertise; however, at least one agency hired a bilingual staff member to help with the challenge of serving a multi-lingual population. In most cases, new staff was hired by traditional methods (advertising, interviewing, etc.); however, in one case, new (paid) staff were recruited from the community.

Hiring new staff sometimes meant that projects were on hold until the hiring process was completed, and even after the hiring process, there were lags in some projects as they waited for new staff to be oriented and/or trained. In contrast, at least one project hired a new staff member with the express purpose of moving the project forward with greater speed.

The process of expanding existing projects was largely described in terms of improvements or upgrades. In some cases, starting or expanding a project required capital expenditures, and some of the vitamin funds were used in this way, for such needs as improving kitchen facilities and upgrading kitchen equipment.

Funding

Nearly every state in the country experienced budget problems in fiscal year 2002 that became magnified in 2003¹² and Massachusetts was no exception. In order to close the deficit, budgets for vital public programs and social services were cut. Among the cuts were family health, nutrition and assistance programs, including a 59% cut in family health programs, reduced services for an estimated 9,000 families, and a nearly half a million dollar cut in The Women, Infants, and Children's Nutrition Program (WIC).¹³ In addition to state budget cuts, organizations felt financial strain in other ways. Many of the recipients of the vitamin litigation funds referenced the troubling fiscal context:

“State budget cuts severely impacted our ability to fund this program.”

“We had to reconsider how the grant funding would be used given the level of funding we received along with state budget cuts and a decline in Medicaid reimbursement.”

“Most of the Center’s non-essential community service programs were cut in 2003.”

“After the application was submitted the state de-funded the program.”

“[There is an] increased community need for Food Pantry services, brought on by the closure of many surrounding Food Pantries because of a lack of funding.”

“The staff are very grateful that the funding was made available to so many types of nutrition projects. It was a miracle that the funding came along during this fiscally difficult time.”

“We have experienced significant strain due to consolidations in the food industry.”

¹² National Conference of State Legislatures: <http://www.ncsl.org>

¹³ Massachusetts Coalition for Healthy Communities: <http://www.masschc.org>

Grant Notice and Application

As shown in Table 3, project directors found out about the funding opportunity in a variety of ways. They heard about it from individuals within their own organization and other organizations, such as their agencies’ headquarters and from state departments, including the Department of Public Health and the Department of Education. They also learned of the RFP from print sources, such as newspapers or mailings, and via the Internet. In addition, some directors mentioned first hearing about the opportunity from Ellis and Rapacki.

Table 2. Notification of Funding Opportunity

How Directors Heard About the Opportunity	Number of Directors (N=45)
Someone within their own organization	8
Ellis and Rapacki	8
Another organization	7
Newspaper	6
Department of Public Health	5
State WIC Program	3
Project Bread	2
Not sure	6

Project directors had a variety of reasons for applying for the grants. Some wanted to incorporate a new program component into an existing program. In most cases this meant adding an education component to existing services. Others wanted to combine smaller projects into a larger program that could have greater reach and leverage, and wanting to update program components.

In some cases, hearing about the funding opportunity inspired agencies to think about possible projects they could implement. Directors described how their knowledge of and experience in the community enabled them to identify a need in the community for a particular service relevant to the grant money, or a problem to which they could respond. In some cases, directors took stock of their existing programs and identified limitations. They thought both about the fit of the grant with existing efforts, as well as the possibility of the grant to address limitations in their programs. Many respondents stressed that the vitamin grant was a “natural fit” with their work. As one director put it:

“It is a great fit – a nutrition grant program that reaches out into urban areas and to urban kids.”

In other cases, agencies had ideas on the “back burner,” projects in mind for some time, looking and waiting for funding opportunities. For example, the project of the Greater Lawrence Community Action Council fulfilled the 23-year veteran director’s longtime ambition to incorporate books into WIC nutrition counseling sessions.

A number of directors noted the dearth of funding opportunities in this area and commented on the uniqueness of this particular funding opportunity.

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“Food is a big expense and it is difficult to get funds to cover food.”

“There are not many opportunities for childhood nutrition projects.”

“The idea of receiving funds from a law firm through a class action suit was strange.”

Projects that did not receive their proposed budget had to change their plans accordingly, as illustrated in the following comments:

“Decreased funding as well as failure to secure federal funds resulted in funds being used as a stopgap measure to sustain rather than expand existing operations.”

“The original plan of buying a place that could shelter both, the pantry and the supper, had to be abandoned and the money was used to supplement food given out at the pantry.”

Decreased funds affected project in three main ways. First, projects hired fewer or no new staff. Second, the content/services of the projects were narrowed, with fewer overall goals and a smaller number of beneficiaries. Finally, projects purchased fewer materials with fewer funds. In addition, at least one project’s original plans changed when the Court disallowed subcontracting.

Cost-Saving Measures

Thirty-five project directors reported using cost-saving measures. These included traditional cost-saving measures, such as donations and in-kind contributions. Directors also mentioned low rent, staffing measures (e.g., use of volunteers, interns), and carrying out certain activities or services in-house (e.g., printing). Other measures were more innovative, for instance, using the Internet to locate free program materials (e.g., curricula) rather than purchasing them. At least one project that had realized cost savings was able to extend its project activities accordingly.

Perceived Impact of Projects

“We use simple measures like having enough food to meet the needs of our clients on a daily basis.”

In general, measurement or evaluation efforts consisted of documenting program outputs – the size and/or scope of the goods and services produced or delivered by the program. The most common documentation of outputs included counts of program participants or beneficiaries. Others included hours of operation and the number of educational

materials developed or ordered. Another way in which directors tracked their efforts was through client records. Again, most of the information documented in this fashion fell into the output category. Only three of the 45 projects—Nantucket Nutrition, the United Way, and the Medical Foundation—reported working with an external evaluator.

Despite the challenges described earlier, most project directors reported that they had reached their proposed target population, although some projects clearly did not reach as many people as they had hoped.

Thirty-five of the 45 projects were able to provide estimates of the number of people served by the project. However, some of these projects were unable to separate the number served by the vitamin funds from their total population served. Therefore, estimates of the settlement’s reach in these 35 sites must be viewed with appropriate caution. As shown in Table 5, the estimated number of people served by the grant across the 35 sites was 177,890.

Table 3. Estimated Number Served by Vitamin Litigation Project

Amount of award	Average number served	Range Served*	Total served
Food provision	14,240	48-145,000	156,634
Education	886	12-7,026	21,256
Overall-excluding one outlier project ¹⁴	967	12-7,026	32,890
Overall-including outlier	5,082	12-145,000	177,890

The directors who participated in the interviews described their perceptions of the project’s impact in terms of increased reach, changes in the target population, food provision, and/or community or institutional impact. Most interviewees were not able to provide reliable information on whether the funding changed the number of people served by their organizations. However, 13 directors did report that the funding had increased their numbers. Projects reached more people through increased advertising, increased services, adding to their staff so that they could handle increased volume, adding new “customers,” and offering activities with associated “ripple effects.”

Sustainability

Our site visits occurred before funding from the grant had expired, so the projects were not assessed at the critical point of sustainability. Rendering a sound verdict on sustainability would require follow-up with the programs in the future to assess how many are still operating and to what extent, after initial funding. For the most part, we found program directors had given some thought to sustainability, but had not taken concrete steps in that direction. However, we can consider common *indicators* of sustainability at this early timepoint, including fundraising, evaluation, and partnerships.

¹⁴ Project Bread was an outlier, that is, its estimate was an abnormal distance from the others.

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At the time of our site visits, nearly all the projects were engaged in some type of fundraising, seeking additional grants, contracts, or foundation funding, and three projects had some such funding secured. In addition, several projects indicated utilizing in-kind contributions. In order to be able to achieve sustainability, directors need to be able to make a case for their program. Our interviews indicated some directors were in a position to do this. They had identified and understood the problems their programs were designed to address and the resulting needs. In addition, in most cases, their program activities were a realistic response to meeting that need. However, programs could do more work in clarifying their intended outcomes for participants/beneficiaries.

Another promising sign of sustainability was the use of partnerships. Our audit did not explore in-depth the collaborative relationships between grant recipients and their partners, so we do not know the extent to which they developed and shared a vision for the future of the program. However, most programs were a result of collaboration, which typically strengthens sustainability. Following are a sample of comments related to sustainability:

“Development staff meet weekly to assess and strategize for funding opportunities. This has resulted in a diversified funding stream from public and private sources. Staff strategically manage the size and timing of our grants to insure that if one funding source ends, we will have sufficient lead-time to find a replacement.”

“Regrettably, we have been unable to obtain funding for this program for the coming year. We will probably continue this program, however, without funding for it we will be unable to hire replacement staff.”

“To date, we have received enough funds to sustain our program level.”

“To ensure the sustainability of the project, efforts are being made to make program activities as relevant as possible to residents within the existing structures and organizations.”

“For the time being, it is being continued through government funding, but in the long term community support will need to be generated to continue this program.”

“The development department sends hundreds of grant requests per year and we have a strong private donor base. We utilize government help when we qualify and we can count on the demand of a growing homeless population. We also have a strong volunteer program within our food service, which helps reduce cost and spread the word of the need of our service to the community.”

Self-Reported Project Results¹⁵

This section of the report summarizes information obtained in the final project reports submitted by grantees to Ellis & Rapacki and forwarded to the Center for Social Policy. The Associated Grantmakers Common Report Form was used as the structure for project reporting. The interim report form required grantees to describe their accomplishments or progress toward meeting their goals/objectives, and any delays in meeting their objectives. The final report form required grantees to respond to the following:

- their major accomplishments, the steps and actions they took to achieve their goals, any measures used to determine their progress, and unexpected results or key learnings,
- setbacks, including the impact of the setbacks on the project and how were setbacks addressed,
- additional funding received and the alteration of goals if the total budget was not raised,
- steps to ensure sustainability of the project beyond the grant period, and
- any effects of collaboration with other organizations.

Grantees' responses are described accordingly, and responses from interim and final reports are presented together. We coded the accomplishments described in the reports into six categories: planning, project activities, collaboration, outputs and outcomes, improved procedures/efficiency, and public recognition. Each is described briefly in this section of the report. Most commonly, projects reported their accomplishments in terms of the activities they had developed, initiated, or completed, or in terms of simple quantitative outputs.

Project Accomplishments

Project Activities

Many projects described their accomplishments by confirming that their proposed activities or services had been implemented or completed. These included (but were not limited to) providing food (including serving and delivering meals and providing food vouchers), providing nutrition education programming, providing cooking classes, and disseminating nutrition information. Sometimes the descriptions were evaluative (e.g., commenting that an activity had been successful), but fell short of describing the success. The following examples illustrate project implementation descriptions:

“Nutrition screening initiative launched.”

“Developed a series of 5 workshops to improve the dietary habits of children ages 1-12 years and their families.”

¹⁵ These findings are based on the final project reports received to date.

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‘An ongoing series of cooking classes have been held with adolescents with developmental disabilities.’

“Completion of food services training program by 15 men and women.”

“Production and distribution of pamphlets with coordinated nutrition education.”

Many projects specifically mentioned developing materials as an accomplishment. Materials included printed informational material, for instance guides, handouts, lists, and newsletters about a range of topics, including nutrition, food access, and physical activity. Organizations also developed classes and curricula, activities, such as games, and menus and recipes. In some cases, the grant enabled organizations to acquire existing materials rather than developing their own. For the most part, the materials were intended for use in outreach or education with their target audiences. Some projects provided classes or workshops, and others projects mentioned giving presentations, or, in at least one case, hosting a symposium.

More unique, and in some cases more innovative, grant-funded activities included evaluating participants’ nutrition, providing physical exercise programming, conducting research, providing youth community service programs, and developing systems (e.g., a client management system, software development).

Collaboration

Several projects referenced their working relationships with other organizations as accomplishments. Recognizing strategically selected partnerships as a means of increasing their reach and impact with their target audiences, these grantees saw collaboration as particularly necessary to funding. As one project reported,

“In order to have our greatest impact, and in light of funding realities, developing collaborations has been a priority. We have collaborated with a wide variety of organizations in nearly all aspects of the program.”

Partners also were selected for their expertise in particular areas related to food and nutrition. Most organizations collaborated with a wide variety of other organizations during all the phases of their projects, including working closely with their communities.

“Obtained widespread community involvement in the governance, promotion, coupon distribution and special event planning components of the market.”

Outputs and Outcomes

Most of the accomplishments (an estimated 44%) described in the final grant reports were outputs, project activities that could be counted, or outcomes. Examples of outputs include quantitative information on the number of beneficiaries, the number of program staff; the number of communities in which the program had been implemented; the number of meals served; the number of trainings or presentations conducted; the number

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of certain kinds of products developed (e.g., printed guides); and the number of visitors to a web site. Other quantitative indicators related to the number of hours of project activity, the number of referrals made, or the number of times the same beneficiary was served by the project.

Some reports contained specific statements about having reached the target audience. In some cases, reports of outputs were accompanied by more evaluative statements, for instance, noting the percentage increase in a particular activity or service, or caseload. The quotes below are representative of grantees' descriptions of program outputs.

"19,916 students were automatically enrolled in the free school meals program, a 193% increase in direct certification for Boston and a 60% increase for Springfield."

"In each of the 3 camp sessions 165 campers participated in a cooking class no fewer than 3 times."

"Over 1,500 families benefited from the program."

"This year 22 trainings were completed in 9 of the targeted communities with partnering agencies."

"We provided approximately 150,000 meals, serving an average of 350 people daily."

"Bag of groceries for 1,134 family members. Considering the many food items per bag, we were able to provide food for 8,787 individual meals through the summer of 2003."

"\$3,300 in emergency food vouchers have been distributed to date."

"Approximately 10 to 30 telephone inquiries per week are being received at the Help-Line."

"Added a behavioral health component that has been instrumental in identifying that 15% of patients in need of psychosocial support."

"Our Program delivered 153 food baskets to isolated elders for Christmas, Kwanza, or Hanukah."

"We increased the number of our pre-prepared home delivered meals by another 150 meals per day."

A number of reports went beyond outputs and described the positive impacts for participants or beneficiaries in the funded projects. Consequences such as those

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described below included access to food, not gaining weight, increased self-esteem, and increased awareness of nutrition and preventive health.

“Over the last year, [we] have made significant progress in ensuring that children have access to food in a non-stigmatizing setting throughout the day.”

“Three-quarters of the girls in the program did not gain weight in the first half of this year, likely due to the nutrition education and 2 hours per week of exercise we provide.”

“Participants have learned that healthy food can taste good, especially a variety of fruit, low fat snacks and low-calorie beverages.”

“The idea of preventative health and its short-term as well as long-term benefits are becoming clearer to key informants in the community.”

“The [Food Pantry] was able to meet the food needs of an additional 2,220 (7,350 total) hungry people in the community.”

“We were able to increase the number of hours to full-time (40 hours per week) which allowed campers to participate more in the cooking classes.”

“The Food Pantry served 514,129 people during the period of this grant, peaking at 670 people per month. This marks a dramatic increase from the previous year when the average number of people served was about 400 per month.”

Finally, some reports simply stated that a particular goal had been met, for instance,

“We were able to partially meet our community outreach nutrition education goals.”

Improved Procedures/Efficiency

Several organizations noted improved efficiency as a result of the grant. They wrote about improving systems of operation and saving money, as evidenced in the following comments:

“The Department of Education saved approximately \$31,000 as the data exchange replaced the old system of mailing out food stamp notifications.”

“The ‘Family Day Care Record Keeping Guide’ helped providers maximize their business deductions thus freeing up funds to enrich their day care programs. This also reduced financial stress experienced by many providers.”

“We were able to support our nutrition staff to attend trainings and continuing education programs.”

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“A very detailed food budget for the meals program and food pantry was designed to track both the sources of food and types of food habitually purchased. In the past the tracking of food expenditures was not done in detail.”

In at least one case, the grant helped them refer clients for services elsewhere, thereby reducing unreasonable demands on their workplace.

Public Recognition

At least two of the projects received an award or other recognition. The United Way of Bedford received the New England Association of Resource Conservation and Development Community Partner Award for *“providing economic development opportunities for agricultural business in Southeastern Massachusetts while building a strong, healthy community within the City of New Bedford.”* This project also received Certificates of Appreciation from the City of New Bedford, Acushnet Heights Neighborhood Improvement Association, Bristol County District Attorney, and Coastline Elderly Services for contributing to the neighborhood revitalization efforts in the Acushnet Heights area. In addition, Coyle and Cassidy High School received a \$1,000 prize from the Alan Feinstein Foundation for being one of the top 50 schools in the nation in terms of collecting food at a food drive.

Steps in Achieving Accomplishments

Grantees described the steps or actions they had taken to achieving the above-described accomplishments. These include steps taken to develop the program and steps take in implementing the program. Key steps/actions can be summarized as follows:

- Program planning,
- Collaborating with other organizations (or with volunteers),
- Hiring staff,
- Identifying suppliers, acquiring equipment or materials,
- Fundraising, negotiating discounts,
- Advertising,
- Identifying/recruiting target audience, and
- Serving target audience.

Less common steps included:

- Conducting some sort of needs assessment,
- Renovating facilities, and
- Tracking program progress.

Delays/Setbacks in Meeting Project Objectives

Sixty percent of the projects indicated in final reports they had experienced delays or setbacks in meeting their project objectives. The most common delay was in hiring staff, particularly for the project manager/coordinator position. As one director explained,

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“The program needed to search for, interview, hire, and train staff, which caused a delay in start up.”

Types of activities that were delayed included planning and formative research, making changes to systems, staff training, beginning partnerships, finding space, recruiting participants, and other general start-up activities. There also were a multitude of setbacks that were unique to a specific project.

Reasons for delays included financial constraints due to budget cuts,¹⁶ financial constraints due to lower than proposed vitamin litigation funding, cost of materials, equipment failure or renovation/construction constraints, schedule conflicts (e.g., needing to reschedule because of weather), staffing problems (e.g., turnover), and ineffective collaborations. The following statements are representative of how directors described delays in meeting project objectives:

“Structural and systematic change is a slow process, particularly in the face of severe state budget cuts.”

“A great deal of effort was expended during this first six months developing the rationale and scientific ground for the changes which are to be implemented in the second six months.”

Funding and Sustainability

Sixty-eight percent of projects indicated receiving funding in addition to the Vitamin Litigation Grant. Funding sources included federal, state, and local sources, foundations, and individual donors. Two common sources were Project Bread and FEMA. Several organizations mentioned having spent their own funds on the project or having received in-kind contributions.

Most projects indicated a confidence that their efforts would be sustained, and a commitment to steering their projects into the future. Eighty-six percent of projects mentioned taking steps to secure additional funding. Projects also reported taking other steps to ensure the sustainability of their activities. Some focused on developing permanent materials (e.g., program guides) that would help sustain the program. Some mentioned having garnered community support for the program, and made the link between community awareness and likelihood of obtaining funding. Others gave examples of the ways in which the staff supported the program, for instance, through regular meetings about the project. Several reported pointed to partnerships with other organizations as a means of sustaining the program.

¹⁶ These included staff shortages, cutbacks to programming, and sites closing.

Collaboration

Most but not all of the grantee organizations collaborated with other partners. As described earlier, many grantees viewed collaboration as one of their major accomplishments. In addition, the reporting form asked grantees to comment on the effects of collaboration, if any. Most grantees simply acknowledged that they collaborated with other organizations to operate their programs. Those who provided additional comments indicated they viewed their partnerships as critical to their programmatic efforts and that they enjoyed the collaboration. Specifically, these grantees described the positive effects of collaboration in three major areas:

1. Collaboration helped raise awareness of the projects and increased culturally appropriate reach into the target communities.
2. Collaboration ensured the projects had necessary expertise.
3. Collaboration resulted in donations and other cost-savings.

Conclusions and Recommendations

The problems of hunger and nutrition deficiency have prompted policymakers to consider more expansive food and nutrition policy. The Massachusetts Vitamin Litigation Project stands as an example of a unique and timely funding opportunity. By funding both food provision and nutrition education projects, the funding addressed both the short-term and long-term needs of Massachusetts' residents.

As noted above, funded organizations used the litigation grants for food provision and education projects. Our programmatic audit indicates that funded organizations complied or did their best to comply with the original project plans set forth in their accepted proposals. We confirm that food provision projects did intervene on behalf of food insecure individuals and families in the Commonwealth of Massachusetts, responding to the basic and sometimes immediate needs of their target audiences by providing them with food. This was accomplished through direct food provision and through food vouchers. Further, we attest that the education projects used the vitamin litigation funds to design and implement programs to promote nutrition and exercise.

This study examined independently the projects carried out as part of The Massachusetts Vitamin Litigation Project. Our process audit of programmatic grantees' reports and our site visits resulted in descriptive information about the operation of the projects as well as lessons learned regarding the implementation and perceived outcomes of food and nutrition projects. Here, we offer conclusions about the condition of the funded food and nutrition projects and consider broad program and policy implications. To the extent that the projects are representative of food and nutrition programs statewide, or nationally, the observations made here might be generalized to a broader context.

While the two types of projects were not mutually exclusive, there was not a great deal of overlap between provision and education. Both food provision and education efforts have their place in policy and programs to address hunger and poor nutrition. The strongest policy response is to complement food provision efforts, which respond to the immediate needs posed by hunger, with education efforts, which address the underlying and ongoing problems associated with poor nutrition. In particular, food provision does not ensure sufficient nutrition. Especially for those accessing food through pantries, free meals, and vouchers, some type of nutrition education component would benefit individuals and families in the longer-term. Programs that provide food—namely food pantries—should endeavor to dispense nutrition information along with food, such as placing flyers in grocery bags or printing information on the food bags.

More planning and better strategies are needed for recruitment and retention of program participants. Given the daily challenges faced by most low-income families and children, some sort of inducement or incentive to participate should be offered if at all feasible. Once recruited for the program, participants also need support or incentives to attend and complete the program. Retention is likely to be boosted if participants form relationships with other participants and with program staff; thus, some effort should be made to promote such networking. In addition, and particularly for low-income families, providing or covering the cost of transportation and/or child care should be considered.

The distribution of the multi-million-dollar settlement to food and nutrition programs was innovative. In this case, the funded organizations were given latitude to propose their own unique projects addressing problems with which they were most concerned. This allowed grantees to leverage their existing expertise, operations, and partnerships. The result was that there was no one model of food provision or nutrition education. While each program established individual goals, there were no specific goals or objectives governing the settlement distribution as a whole. In future distributions of this kind, it is worth considering establishing overarching criteria against which to judge the success of funded projects.

Start-up time for projects like these, whether they are new or building on existing efforts, is generally underestimated. Activities such as recruitment and/or training of staff, building relationships with partner organizations, securing appropriate sites for programs, developing materials, and careful planning of the ensuing implementation of the program need to be incorporated into programmatic plans. One way to ensure the appropriate acknowledgement of start-up time is to include it as an activity on the project time line. This way, it is something that both funder and program can reflect upon and discuss. Putting start-up time in a time line also forces early thinking about which program activities will require more time than others.

Similarly, programs must be realistic about what can be accomplished in a given time frame; ambitious plans are not always feasible in a short time frame, especially when most programs experience delays. This is especially important given that programs are often judged against the goals and objectives outlined in their original grant proposals.

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Collaboration strengthens programmatic efforts improving the planning and implementation of projects, and helps to ensure that projects do not duplicate other ongoing efforts. Opening up access to the target populations that are the purview of each organization, and in so doing can increase the reach of a project – both in its implementation and dissemination phases. It also benefits both or all organizations involved in the collaboration by allowing the transfer of knowledge and skills across organizations. This benefits the project at hand, and is likely to have a long-term benefit in future projects.

The timing of the audit, occurring largely before funding from the grant expired, does not allow for a sound verdict on the sustainability of the projects. However, most projects had given some thought to sustainability, and the majority of them reported taking steps to secure additional funding.

It is more difficult to present study findings about the settlement's outcomes and longer-term impact. Due to lack of thorough evaluation, the conclusions that might be drawn about the outcomes of the projects are limited in this audit. Assessment through program evaluation research is necessary in order to better understand the effectiveness of these kinds of projects, to link project activities and other components of project process to outcomes, and to improve the projects.

In conclusion, the study confirmed that the settlement achieved in large part what its designers intended: to assist people throughout Massachusetts with a variety of food and nutrition needs. Future similar projects would benefit from integrated food provision and education components and evaluation.

Appendix A: List of all Projects Visited

Wave 1

- Baystate Medical Center
- Brigham and Women's Hospital d/b/a Brookside Community Health Center
- City Mission Society
- Citizens for Citizens, Inc.
- Colonel Daniel Marr Boys and Girls Club
- Community Supper, Inc.
- Community Teamwork, Inc. Lowell,
- COWASS North America, Incorporated
- Franklin Community Action Corporation
- Girls Incorporated of Lynn
- Great Brook Valley Health Center
- Greater Lawrence Community Action Council, Inc.
- Haley House, Inc.
- Lynn Economic Opportunity, Inc.,
- Massachusetts School Food Service Association Statewide
- Mattapan Community Development Corporation
- Nantucket Nutrition Action
- Notre Dame Montessori School
- Pine Street Inn
- Project Bread
- Self Help, Inc. - Brockton, South Shore
- St. Paul's Kitchen
- The Family Pantry—Damien's Place, Corp.
- The Federation of Massachusetts Farmers' Markets
- The Medical Foundation Statewide
- The People's Pantry
- The United Arc of Franklin and Hampshire Counties, Inc.
- United Way of Mass. Bay, Inc.
- Veterans Northeast Outreach Center, Inc.
- West Suburban Elder Services, Inc.

Wave II

- Boston Minuteman Council, Boy Scouts of America
- Cape Cod Healthcare
- Coalition Against Poverty, Inc.
- Community Involved in Sustaining Agriculture
- Girls Incorporated of Worcester
- NFI Massachusetts, Inc.
- Project COPE, Inc.

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- The Protestant Guild for Human Services
- The R.O.S.E. Fund
- Re-Vision House, Inc.

Wave III

- Refugee Apostolate
- Haitian Public Health Initiative
- YWCA of Lowell
- AIDS Action Committee of Massachusetts
- Roca, Inc.