

V(A). Planned Program (Summary)

Program # 6

1. Name of the Planned Program

Better Foods, Nutrition and Family Well Being

V(B). Program Knowledge Area(s)

1. Program Knowledge Areas and Percentage

KA Code	Knowledge Area	%1862 Extension	%1890 Extension	%1862 Research	%1890 Research
703	Nutrition Education and Behavior		20%		
711	Ensure Food Products Free of Harmful Chemicals, Including Residues from Agricultural and Other Sources		20%		
722	Zoonotic Diseases and Parasites Affecting Humans		20%		
723	Hazards to Human Health and Safety		20%		
724	Healthy Lifestyle		20%		
	Total		100%		

V(C). Planned Program (Inputs)

1. Actual amount of professional FTE/SYs expended this Program

Year: 2010	Extension		Research	
	1862	1890	1862	1890
Plan	0.0	1.5	0.0	0.0
Actual	0.0	1.5	0.0	0.0

2. Actual dollars expended in this Program (includes Carryover Funds from previous years)

Extension		Research	
Smith-Lever 3b & 3c	1890 Extension	Hatch	Evans-Allen
0	105798	0	0
1862 Matching	1890 Matching	1862 Matching	1890 Matching
0	105882	0	0
1862 All Other	1890 All Other	1862 All Other	1890 All Other
0	251678	0	0

V(D). Planned Program (Activity)

1. Brief description of the Activity

A five-day Summer Health and Fitness Academy was held at two separate locations for fifty-five youth in grades five to seven. These youth who live in nine Alabama Black Belt counties were made to understand the connection between childhood obesity and debilitating diseases. They were taught how to reduce the risk of obesity by selecting and preparing economical low-fat foods and developing healthy eating habits and lifestyles. The program also emphasized basic social etiquettes and decent behavior among youth. At the end of the program, youth participants demonstrated increased knowledge in healthy food choices, and an intended readiness to change their behavior by selecting healthy snacks.

2. Brief description of the target audience

The target audience will consist of under-served and under-represented youth and adult populations in the twelve Black Belt counties of Alabama.

V(E). Planned Program (Outputs)

1. Standard output measures

2010	Direct Contacts Adults	Indirect Contacts Adults	Direct Contacts Youth	Indirect Contacts Youth
Plan	225	75	225	75
Actual	346	1997	264	1968

2. Number of Patent Applications Submitted (Standard Research Output)

Patent Applications Submitted

Year: 2010
 Plan: 0
 Actual: 0

Patents listed

3. Publications (Standard General Output Measure)

Number of Peer Reviewed Publications

2010	Extension	Research	Total
Plan	0	0	
Actual	0	0	0

V(F). State Defined Outputs

Output Target

Output #1

Output Measure

- Measures will include: Participants will incorporate skills and change behaviors; the number of people who follow exercise guidelines on most days 60-minutes, 5 days a week; the percent of participants using food guide pyramids and dietary guidelines and the percent of participants reporting improved quality of life will increase.

Year	Target	Actual
2010	175	175

V(G). State Defined Outcomes

V. State Defined Outcomes Table of Content

O. No.	OUTCOME NAME
1	Participants will incorporate skills and change behavior; the number of people following guidelines on most 60-minutes, 5 days a week will increase; the percent of participants using food guide pyramids and dietary guidelines will increase and the percent of participants reporting improved quality of life will increase.

Outcome #1

1. Outcome Measures

Participants will incorporate skills and change behavior; the number of people following guidelines on most 60-minutes, 5 days a week will increase; the percent of participants using food guide pyramids and dietary guidelines will increase and the percent of participants reporting improved quality of life will increase.

2. Associated Institution Types

- 1890 Extension

3a. Outcome Type:

Change in Condition Outcome Measure

3b. Quantitative Outcome

Year	Quantitative Target	Actual
2010	150	0

3c. Qualitative Outcome or Impact Statement

Issue (Who cares and Why)

Nutrition is essential for growth, development, health and well being. Greene, Hale, Sumter, Marengo, Perry, Dallas and Macon County families consist of a total 12,532 families/individuals who receive food stamps. These families/individuals are potential participants for the Expanded Food Nutrition Education Program (EFNEP). The EFNEP program educates its participants on decision making skills as it relates to families/individuals eating right, being active and healthy. The Eating Right and Being Active/Kids in the Kitchen curriculums allow the EFNEP educators to measure changes in knowledge and behavior that occurs by the end of the class series.

What has been done

A total of 1,141 youth and 1,051 adults were recruited/enrolled and graduated in the EFNEP/Eating Smart, Being Active and Kids in the Kitchen curriculums (8 class series). Adults young adults/ were taught from the curriculum: 1.) Get Moving, 2.) Plan, Shop and Save, 3.) Vary your Vegetables, 4.) Half your Grains, 5.) Build Strong Bones, 6.) Go Lean with Protein, 7.) Make a Change, 8.) Celebrate-Recap and Wrap-up. These lessons were taught on an individual and group basis.

Results

As a result of the pre/post test participants gains and applied knowledge in the areas of food safety, food preparation, nutritious snacks and meals and being physically active. Educators have a total of 630 youth and 458 adults with documentation data to measure changes in knowledge and behavior (Macon County data is missing). The EFNEP program educates its participants on decision making skills as it relates to families/individuals: Eating Smart, Being Active and Healthy/Kids in the Kitchen. The Eating Smart and Being Active Curriculum allowed the EFNEP Educators to measure changes in knowledge and behaviors. According to the

pre/post assessment participants gained and applied knowledge in the areas of food safety, food preparation, nutritious snacks and meals, being physically active.

4. Associated Knowledge Areas

KA Code	Knowledge Area
703	Nutrition Education and Behavior
711	Ensure Food Products Free of Harmful Chemicals, Including Residues from Agricultural and Other Sources
722	Zoonotic Diseases and Parasites Affecting Humans
723	Hazards to Human Health and Safety
724	Healthy Lifestyle

V(H). Planned Program (External Factors)

External factors which affected outcomes

- Natural Disasters (drought, weather extremes, etc.)
- Economy
- Appropriations changes
- Government Regulations
- Competing Programmatic Challenges
- Populations changes (immigration, new cultural groupings, etc.)

Brief Explanation

V(I). Planned Program (Evaluation Studies and Data Collection)

1. Evaluation Studies Planned

- Before-After (before and after program)
- During (during program)
- Case Study
- Comparisons between different groups of individuals or program participants experiencing different levels of program intensity.

Evaluation Results

For youth, results of the pre and post tests showed that 90 percent increased their knowledge and understanding of healthy nutrition and 95 percent improved their awareness of food choices that can help to improve their diets and overall healthy lifestyle. However, 70 percent lack or do not practice or model the behaviors needed for a healthy lifestyle. They need the support and modeling of healthy behaviors from home and at school. For African Americans where church is their gathering place, the good behaviors need to be practiced more often. For example, foods served at church gatherings should contain more fruits, vegetables and healthy snack options.

Adult participants in nutrition education classes also showed improvement in food resource management practices, nutrition practices, and food safety practices. Overall, 90 percent showed improvement in at least one of four food resource management practices, 93 percent showed improvement in at least one of five nutrition practices, and 74 percent showed improvement in one of two food safety practices.

Key Items of Evaluation

Parents and other caregivers play a fundamental role in teaching children about healthy behaviors, in modeling those behaviors, and in making decisions for children when needed. But those positive efforts can be undermined by local environments that are poorly suited to supporting healthy behaviors, and may even promote unhealthy behaviors. For example, many communities lack ready sources of healthy food choices, such as supermarkets and grocery stores. Or they may not provide safe places for children to walk or play. In such communities, even the most motivated child, or adolescent may find it difficult to act in healthy ways