

V(A). Planned Program (Summary)

Program # 2

1. Name of the Planned Program

Childhood Obesity

V(B). Program Knowledge Area(s)

1. Program Knowledge Areas and Percentage

KA Code	Knowledge Area	%1862 Extension	%1890 Extension	%1862 Research	%1890 Research
205	Plant Management Systems	1%		0%	
305	Animal Physiological Processes	0%		5%	
504	Home and Commercial Food Service	5%		0%	
703	Nutrition Education and Behavior	67%		32%	
704	Nutrition and Hunger in the Population	3%		0%	
724	Healthy Lifestyle	21%		21%	
802	Human Development and Family Well-Being	0%		21%	
806	Youth Development	3%		21%	
	Total	100%		100%	

V(C). Planned Program (Inputs)

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

Year: 2010	Extension		Research	
	1862	1890	1862	1890
Actual	6.6	0.0	4.2	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
136540	0	7412	0
1862 Matching	1890 Matching	1862 Matching	1890 Matching
136540	0	7412	0
1862 All Other	1890 All Other	1862 All Other	1890 All Other
1911378	0	2463414	0

V(D). Planned Program (Activity)

1. Brief description of the Activity

UC ANR's integrated research and extension programs conducted research projects, workshops, education classes and demonstrations, as well as one-on-one interventions. In addition, the programs used newsletters and collaborations with other agencies and organizations to create and deliver programs.

2. Brief description of the target audience

The target audience of some programs is underserved groups but also UC ANR reaches out to the general public, especially through its efforts to change state and local policies and create environments conducive to healthy lifestyles and positive youth development. Below is a list of our target groups:

- Children, youth and families in general
- Children in general
- Low and moderate income children, youth and families
- Children at risk for nutrition related health problems, including individuals living in poverty, recent immigrants, and African American, Native American and Hispanic populations
- Nutrition and healthcare professionals
- Preschool, primary, and secondary school teachers and administrators
- Professional childcare providers
- Public agencies and private organizations concerned with food, nutrition, and health
- Patients with metabolic diseases
- Biomedical researchers
- Plant biologists
- Nutraceutical industry

V(E). Planned Program (Outputs)

1. Standard output measures

2010	Direct Contacts Adults	Indirect Contacts Adults	Direct Contacts Youth	Indirect Contacts Youth
Plan	{NO DATA}	{NO DATA}	{NO DATA}	{NO DATA}
Actual	82137	0	4825	0

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

Patent Applications Submitted

Year: 2010
 Plan:
 Actual: 0

Patents listed

3. Publications (Standard General Output Measure)

Number of Peer Reviewed Publications

2010	Extension	Research	Total
Actual	13	11	24

V(F). State Defined Outputs

Output Target

Output #1

Output Measure

- Classes/Short Courses Conducted

Year	Target	Actual
2010	{No Data Entered}	95

Output #2

Output Measure

- Workshops Conducted

Year	Target	Actual
2010	{No Data Entered}	37

Output #3

Output Measure

- Demonstrations and Field Days Conducted

Year	Target	Actual
2010	{No Data Entered}	37

Output #4

Output Measure

- Newsletters Produced

Year	Target	Actual
2010	{No Data Entered}	7

Output #5

Output Measure

- Web Sites Created or Updated

Year	Target	Actual
2010	{No Data Entered}	0

Output #6

Output Measure

- Research Projects Conducted

Year	Target	Actual
2010	{No Data Entered}	13

Output #7

Output Measure

- Videos, Slide Sets, and other AV or Digital Media Educational Products Created

Year	Target	Actual
2010	{No Data Entered}	0

Output #8

Output Measure

- Manuals and Other Printed Instructional Materials Produced

Year	Target	Actual
2010	{No Data Entered}	0

V(G). State Defined Outcomes

V. State Defined Outcomes Table of Content

O. No.	OUTCOME NAME
1	Adults and families with children, participating in the childhood obesity prevention education programs, increased readiness to adopt healthier dietary and lifestyle practices.
2	Low-income families with children, participating in nutrition education programs, adopted healthier dietary practices.
3	Children and youth, participating in nutrition and youth development education programs, adopted healthier dietary and lifestyle practices.
4	Youth and their families, participating in 4-H programs, adopted healthier dietary and lifestyle practices.
5	Youth, participating in a summer day camp, adopted healthy eating habits.
6	Latino families, participating in the Eat Well Dine Well health awareness and prevention program, adopted healthier lifestyle practices.

Outcome #1

1. Outcome Measures

Adults and families with children, participating in the childhood obesity prevention education programs, increased readiness to adopt healthier dietary and lifestyle practices.

2. Associated Institution Types

- 1862 Extension
- 1862 Research

3a. Outcome Type:

Change in Knowledge Outcome Measure

3b. Quantitative Outcome

Year	Quantitative Target	Actual
2010	{No Data Entered}	116

3c. Qualitative Outcome or Impact Statement

Issue (Who cares and Why)

What has been done

Results

4. Associated Knowledge Areas

KA Code	Knowledge Area
703	Nutrition Education and Behavior
802	Human Development and Family Well-Being
806	Youth Development

Outcome #2

1. Outcome Measures

Low-income families with children, participating in nutrition education programs, adopted healthier dietary practices.

2. Associated Institution Types

- 1862 Extension
- 1862 Research

3a. Outcome Type:

Change in Action Outcome Measure

3b. Quantitative Outcome

Year	Quantitative Target	Actual
2010	{No Data Entered}	1199

3c. Qualitative Outcome or Impact Statement

Issue (Who cares and Why)

What has been done

Results

4. Associated Knowledge Areas

KA Code	Knowledge Area
703	Nutrition Education and Behavior
802	Human Development and Family Well-Being
806	Youth Development

Outcome #3

1. Outcome Measures

Children and youth, participating in nutrition and youth development education programs, adopted healthier dietary and lifestyle practices.

2. Associated Institution Types

- 1862 Extension
- 1862 Research

3a. Outcome Type:

Change in Knowledge Outcome Measure

3b. Quantitative Outcome

Year	Quantitative Target	Actual
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2010 {No Data Entered} 1728

3c. Qualitative Outcome or Impact Statement

Issue (Who cares and Why)

What has been done

Results

4. Associated Knowledge Areas

KA Code	Knowledge Area
703	Nutrition Education and Behavior
806	Youth Development

Outcome #4

1. Outcome Measures

Youth and their families, participating in 4-H programs, adopted healthier dietary and lifestyle practices.

2. Associated Institution Types

- 1862 Extension
- 1862 Research

3a. Outcome Type:

Change in Action Outcome Measure

3b. Quantitative Outcome

Year	Quantitative Target	Actual
2010	{No Data Entered}	0

3c. Qualitative Outcome or Impact Statement

Issue (Who cares and Why)

Obesity among 6- to 11-year-old youth has tripled over the past 30 years. Many youth and adults lack basic meal planning and food preparation skills. In a typical week in 2007, the number of dinners that were cooked and eaten at home was 4.8, but only 57 percent were prepared from scratch (Food Technology, 2008). Empowering youth and their families to adopt healthy food habits - such as planning, preparing and sharing meals at home - will improve the well-being of the entire household.

What has been done

4-H school-age youth and parents participated in a six-week "Healthy Living" research project to evaluate the effectiveness of a family approach to preventing childhood obesity. The goals of the research project were to improve the nutrition behaviors of youth and their families and to encourage physical activity. Each two-hour meeting began with a fun physical activity, followed by preparation of lunch or dinner using a variety of fresh fruits and vegetables. After sharing a family-style meal, the youth participated in an interactive nutrition activity and then concluded the class by recording five new things they learned. The UC Cooperative Extension Health Promotion Workgroup conducted the pilot project in Contra Costa, Yolo and Amador counties and produced a food and physical activity curriculum called "Healthalicious Cooking."

Results

Forty-four youth completed the youth-only series and 38 youth completed the same series along with an adult member of their families. Participation in project influenced nutrition and physical activity knowledge, attitudes and behaviors. Compared with the youth-only group, parents who participated in the youth-adult series were more likely to express confidence in modifying recipes to reduce fat and sugar, while still maintaining acceptability with their families. Among the youth, there was an overall trend towards nutrition behavior change, with significant change observed in reduced soda and sports drink consumption. In addition, youth were better able to identify whole grains.

4. Associated Knowledge Areas

KA Code	Knowledge Area
703	Nutrition Education and Behavior
806	Youth Development

Outcome #5

1. Outcome Measures

Youth, participating in a summer day camp, adopted healthy eating habits.

2. Associated Institution Types

- 1862 Extension
- 1862 Research

3a. Outcome Type:

Change in Action Outcome Measure

3b. Quantitative Outcome

Year	Quantitative Target	Actual
2010	{No Data Entered}	0

3c. Qualitative Outcome or Impact Statement

Issue (Who cares and Why)

There is a national epidemic of childhood obesity. Experts estimate one in five children between the ages of 6 and 17 are overweight. Millions of these children face a higher risk of developing obesity-related disorders such as diabetes and heart disease during early adulthood. An effective approach to address the complex issue of childhood overweight is to create environments that promote healthy eating and physically active lifestyles.

What has been done

UC Cooperative Extension provided seven weeks of summer day camp experiences for low-income youth, ages 6 to 8 years old. The sessions were held at community centers and elementary school sites. The camp program included nutrition education, cooking, arts and crafts, games and fitness activities. The interactive, hands-on activities taught children about good food habits. The youth prepared snacks, exercised to music, and participated in crafts, kitchen science and gardening activities related to good health and nutrition.

Results

About 100 elementary school-aged youth participate in the nutrition camp program each year. Pre- and post-assessments indicated that 84 percent of the participants increased their knowledge about the importance of eating a variety of nutritious foods. Many began to make healthier snack choices, and practiced hand washing food safety.

4. Associated Knowledge Areas

KA Code	Knowledge Area
703	Nutrition Education and Behavior
806	Youth Development

Outcome #6

1. Outcome Measures

Latino families, participating in the Eat Well Dine Well health awareness and prevention program, adopted healthier lifestyle practices.

2. Associated Institution Types

- 1862 Extension
- 1862 Research

3a. Outcome Type:

Change in Action Outcome Measure

3b. Quantitative Outcome

Year	Quantitative Target	Actual
2010	{No Data Entered}	0

3c. Qualitative Outcome or Impact Statement

Issue (Who cares and Why)

Poor diet and physical inactivity can contribute to obesity, cancer, cardiovascular disease and diabetes. Latinos have 21 percent greater obesity prevalence than whites, according to researchers from the U.S. Centers for Disease Control and Prevention. More than 10 percent of Latinos have been diagnosed with diabetes, while 7 percent of whites and 8 percent of Asians suffer from the disease, according to the American Diabetes Association. Chronic diseases can result in disability and decrease the quality of life for family members.

What has been done

UC Cooperative Extension in Sacramento County provides "Eat Well Dine Well," a health awareness and prevention program designed to empower individuals to make behavior changes that reduce the risk of chronic health-related illnesses. The program provides participants opportunities to:

- *Increase understanding about healthy versions of familiar foods that are easy and quick to prepare, inexpensive, and tasty

- *Practice cooking techniques that substitute low-fat, low-sugar and low-sodium ingredients to make recipes healthier

- *Engage in physical activity as a component of healthy living

The weekly three-part workshop series are held at various community-based agency sites that provide services to low-income Latino families.

Results

The average yearly clientele participation is approximately 167 low-income adults; 93 percent of the participants are Latino. Evaluations completed by the participants before and after participating indicated:

- * 88 percent increase in participants making changes in recipes to make them lower in fat, sodium or sugar.

- *76 percent increase in participants engaging in moderate physical activity on a daily basis.

- * 94 percent increase in knowledge of the importance of consumption of adequate amounts of fruits and vegetables, and the practice of portion size control strategies to improve diet.

4. Associated Knowledge Areas

KA Code	Knowledge Area
724	Healthy Lifestyle

V(H). Planned Program (External Factors)

External factors which affected outcomes

- Economy
- 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

Evaluation Results

Key Items of Evaluation