

V(A). Planned Program (Summary)

Program # 5

1. Name of the Planned Program

Childhood Obesity, Nutrition, and Healthy Lifestyles

Reporting on this Program

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 FTE/SYs expended this Program

Year: 2012	Extension		Research	
	1862	1890	1862	1890
Plan	0.0	4.5	0.0	0.0
Actual Paid Professional	0.0	5.2	0.0	0.0
Actual Volunteer	0.0	0.0	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	461213	0	0
1862 Matching	1890 Matching	1862 Matching	1890 Matching
0	280696	0	0
1862 All Other	1890 All Other	1862 All Other	1890 All Other
0	662816	0	0

V(D). Planned Program (Activity)

1. Brief description of the Activity

Educational activities include workshops, summer programs, one-on-one intervention, in-school and after-school demonstrations and lectures and in-service training meetings for Extension agents and paraprofessionals who participate in this program. Key program activities include, summer youth college program, summer health and fitness academy, and EFNEP educational sessions.

TUCEP organized 5-day workshop training camps for 135 5th - 9th graders called the Expanded Summer Health and Fitness Academy (SHAFSA). Six camps were organized in 14 neighboring Alabama counties during the summer of 2012. The training curriculum emphasized healthy food choices following the USDA My Plate food guide and physical activity to support childhood obesity prevention and healthy lifestyles. About 86 percent demonstrated knowledge of carbohydrate, protein, and other food groups needed as "healthy food choices and menu ideas for the family.

Twenty-eight head start staff and parents of attending preschoolers were provided with the Eating Smart Being Active curriculum. Training provided to food preparers includes varying recipes to promote maximum benefit and portion sizes for preschoolers. A center garden was planted during the year by community volunteers in an effort to model for parents as well as, students and staff the process of growing their own vegetables. Preschoolers are provided the opportunity to plant their own seeds in a controlled classroom environment to promote home gardening. Cooking demonstrations are held and are paired with the administration of the Eating Smart Being Active curriculum as well as, fitness classes from community partners. Rolling Banners were placed in the sites to promote the awareness of the 10 essential nutrition tips and the HS/HS-K program. Newsletters were distributed once a month in an effort to keep parents abreast to different trends, ideas, and tools to promote healthy lifestyles. Physical fitness equipment was provided to enhance the physical activity of preschoolers and is implemented in the curriculum. Technology labs were provided to participating sites to encourage utilization of effective interactive tools that promote healthy lifestyles and are used by both students and adults.

2. Brief description of the target audience

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

3. How was eXtension used?

eXtension was not used in this program

V(E). Planned Program (Outputs)

1. Standard output measures

2012	Direct Contacts Adults	Indirect Contacts Adults	Direct Contacts Youth	Indirect Contacts Youth
Actual	3679	102001	800	1400

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

Patent Applications Submitted

Year: 2012
 Actual: 0

Patents listed

3. Publications (Standard General Output Measure)

Number of Peer Reviewed Publications

2012	Extension	Research	Total
Actual	0	0	0

V(F). State Defined Outputs

Output Target

Output #1

Output Measure

- This Program will follow Outcome Evaluation Methods by Green and Kreuter, 1991. This type of evaluation will provide data concerning short-term effects of the program, including increased awareness and knowledge, expressed intentions to make recommended changes, and responses to public service announcements. The measures can be self reported (interviews with the intended audience) evident changes in the number of people being screened for a cardiovascular (CVD) risk factor at a local health fair or a comparative study (comparing CVD knowledge of participating audience and of similar group that did not receive the intervention).

Year	Actual
2012	0

V(G). State Defined Outcomes

V. State Defined Outcomes Table of Content

O. No.	OUTCOME NAME
1	The outcome is to decrease the risk of degenerative diseases, improve the quality of life, maintain reasonable weight by monitoring caloric consumption, control disease through diet, exercise, medication, and stress management. 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

The outcome is to decrease the risk of degenerative diseases, improve the quality of life, maintain reasonable weight by monitoring caloric consumption, control disease through diet, exercise, medication, and stress management. 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	Actual
2012	0

3c. Qualitative Outcome or Impact Statement

Issue (Who cares and Why)

The prevalence of obesity is rising faster among African-American and Hispanic children, increasing more than 120 percent in 10 years. Alabama ranks 45 among the 50 states for child well-being, with 31.2 percent of children living in poverty and another 11.2 percent in extreme poverty.

What has been done

Tuskegee University operates a Head Start on Healthy Start by Kindergarten (HS-HS/K) program. Through the HS-HS/K program 161 preschoolers are administered the Color Me Healthy curriculum throughout the school year. Training provided to food preparers' includes varying recipes to promote maximum benefit and portion sizes for preschoolers. A center garden is also planted with the help of volunteers to model for parents as well as, students and staff the process of growing their own vegetables.

Results

Head Start food preparers' have changed the way they prepare and serve foods to children by reducing unnecessary inclusion of sugar, salts and oils in preparation of foods for preschool children. Parents and adult participants have been exposed to and are more conscious of their dietary and physical activity needs and habits. Through personal testimony it has been noted that parents have changed the ingredients that they use to prepare meals. For example, substituting beef with turkey and using olive oil in lieu of butter. Community partnerships have been established in order to provide assistance in promoting and sustaining the program across their individual counties.

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
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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

Program outcomes were affected by economic conditions as evidenced by the number of parents who indicated they could not afford the registration fees. Participation rates were thus significantly lower compared to the previous year.

V(I). Planned Program (Evaluation Studies)

Evaluation Results

Youth and adult participants who participated in nutrition and health awareness programs have been educated on the importance of diet and exercise in obesity and chronic diseases prevention. Almost all the participants in these programs have indicated an intended willingness to change their behavior by making more healthy food choices, staying active and being healthy. About 86 percent of the 135 SHAFAs participants demonstrated knowledge of carbohydrate, protein, and other food groups needed as healthy food choices and menu ideas for the family. Follow up evaluations indicate that students are still making wise choices with fast food, parents report students are keeping them conscious of the foods they purchase, students report using less salt and also preparing more healthier meals and snacks.

Head Start food preparers' have also changed the way they prepare and serve foods to children by reducing unnecessary inclusion of sugar, salts and oils in preparation of foods for preschool children. Parents and adult participants have been exposed to and are more conscious of their dietary and physical activity needs and habits. Through personal testimony it has been noted that parents have changed the ingredients that they use to prepare meals. For example, substituting beef with turkey and using olive oil in lieu of butter. Community partnerships have been established in order to provide assistance in promoting and sustaining the program across their individual counties.

Key Items of Evaluation

TUCEP continues to focus on promoting healthy nutrition and lifestyles as a way of preventing childhood obesity and cardio-vascular diseases through the EFNEP partnership, SHAFA, "Skegee Fit", Senior Olympics and Health Awareness Education Programs.