

**V(A). Planned Program (Summary)**

**Program # 6**

**1. Name of the Planned Program**

Childhood Obesity

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
702	Requirements and Function of Nutrients and Other Food Components	10%	10%	10%	10%
703	Nutrition Education and Behavior	20%	20%	20%	20%
724	Healthy Lifestyle	60%	60%	60%	60%
903	Communication, Education, and Information Delivery	10%	10%	10%	10%
	<b>Total</b>	100%	100%	100%	100%

**V(C). Planned Program (Inputs)**

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

Year: 2012	Extension		Research	
	1862	1890	1862	1890
Plan	16.0	2.6	0.0	0.3
Actual Paid Professional	17.4	2.3	0.0	0.1
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
110789	148144	0	381729
1862 Matching	1890 Matching	1862 Matching	1890 Matching
58874	148144	0	381729
1862 All Other	1890 All Other	1862 All Other	1890 All Other
568205	174909	0	0

**V(D). Planned Program (Activity)**

**1. Brief description of the Activity**

Extension efforts include, but are not limited to, conducting Healthy Habits, Healthy Start - a 6 hour program on healthy eating and physical activity for child care workers, Family Meals Workshops - a series of three, three-hour programs for families with young children, FoodSkills - an eight part workshop for low-income adults without children; Expanded Food and Nutrition Education Program - a series of eight lessons for low-income adults with children; Expanded Food and Nutrition Education Program for low-income youth; training volunteers including Master Food Educators, 4-H leaders, agency personnel, and teachers; providing Just In Time parenting newsletters; incorporating physical activity and healthy foods/snacks in all 4-H camps and after-school programs; providing special educational programs at the 4-H Military Program; and conducting favorite foods contests and CATCH programs for youth. In addition, using videography and other tools, youth will document both the healthy and unhealthy aspects of their communities. This includes those areas involving food, food choices, food safety, food security and other healthy/unhealthy lifestyle aspects of their communities.

**2. Brief description of the target audience**

Day care workers, parents, low-income adults and youth, 4-H youth, Master Food Educators, 4-H leaders, teachers

**3. How was eXtension used?**

Not reporting this year.

**V(E). Planned Program (Outputs)**

**1. Standard output measures**

2012	Direct Contacts Adults	Indirect Contacts Adults	Direct Contacts Youth	Indirect Contacts Youth
<b>Actual</b>	7861	36175	15545	1073

**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
<b>Actual</b>	0	0	0

## V(F). State Defined Outputs

### Output Target

#### Output #1

##### Output Measure

- Number of Competitive Grants Submitted

Year	Actual
2012	12

#### Output #2

##### Output Measure

- Number of Competitive Grants Awarded

Year	Actual
2012	8

#### Output #3

##### Output Measure

- Number of Extension Bulletins and Factsheets

Year	Actual
2012	54

#### Output #4

##### Output Measure

- Number of Invited Presentations

Year	Actual
2012	9

#### Output #5

##### Output Measure

- Number of Volunteered Presentations

Year	Actual
2012	23

**Output #6**

**Output Measure**

- Number of Websites Established

<b>Year</b>	<b>Actual</b>
2012	3

**Output #7**

**Output Measure**

- Number of Workshops Conducted

<b>Year</b>	<b>Actual</b>
2012	365

**Output #8**

**Output Measure**

- Number of Research Projects Completed

<b>Year</b>	<b>Actual</b>
2012	0

**Output #9**

**Output Measure**

- Number of Undergraduate Researchers

<b>Year</b>	<b>Actual</b>
2012	9

**Output #10**

**Output Measure**

- Number of M.S. Graduate Students

<b>Year</b>	<b>Actual</b>
2012	2

**Output #11**

**Output Measure**

- Number of Refereed Journal Articles

<b>Year</b>	<b>Actual</b>
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2012

0

**V(G). State Defined Outcomes**

**V. State Defined Outcomes Table of Content**

O. No.	OUTCOME NAME
1	Statewide educational programs for K-12 youth and teachers focused on nutrition, healthy diets and obesity causing factors that will help reduce the likelihood of food-borne illness, develop good nutritional and dietary habits, avoid obesity, and prevent chronic illnesses related to poor nutrition.
2	Targeted educational programs on understanding the causes of obesity and the means to reduce obesity for low-income communities, youth through after-school programs and childcare workers.
3	Increased number of program participants improving one or more nutrition practices.
4	Increased number of program participants who improve the frequency and quality of family meals.
5	Increased number of program participants engaged in greater levels of physical activity
6	Reducing obesity in Delaware by extension programs that modify individual, family, and community behavior in a manner that promotes healthy lifestyles, physical activity on a regular basis, the consumption of healthy foods in appropriate quantities, and increasing family meals.
7	Greater understanding, particularly in low-income communities and by youth, of the health risks associated with obesity and the options available to prevent or correct obesity problems.

## **Outcome #1**

### **1. Outcome Measures**

Statewide educational programs for K-12 youth and teachers focused on nutrition, healthy diets and obesity causing factors that will help reduce the likelihood of food-borne illness, develop good nutritional and dietary habits, avoid obesity, and prevent chronic illnesses related to poor nutrition.

### **2. Associated Institution Types**

- 1862 Extension
- 1890 Extension

### **3a. Outcome Type:**

Change in Knowledge Outcome Measure

### **3b. Quantitative Outcome**

<b>Year</b>	<b>Actual</b>
2012	0

### **3c. Qualitative Outcome or Impact Statement**

#### **Issue (Who cares and Why)**

: Youth and adults are reflecting rates of increased obesity and health problems at an ever-increasing rate.

#### **What has been done**

In 2010, an intensive 30-hour course in nutrition, physical activity, and food safety was reinstated to provide volunteers with the tools to either assist FCS staff or deliver basic programs in New Castle County. Both technical background information and hands-on experiences are included in the training. Participants successfully completing the training are designated as Master Food Educators (MFEs). The role of the Extension Agent in this area is assisting the curriculum educator and program coordinator to train the volunteers, inform MFEs of volunteer opportunities throughout the year to enable them to complete their required hours, prepare meeting/advanced training agendas, coordinate the preparation & gather supplies for workshops and events, prepare reports of volunteer hours and programs presented or types of events attended, and provide research-based responses to questions posed throughout the year from the volunteers.

#### **Results**

A total of 12 individuals graduated in 2012. This group of volunteers donated 700 hours to Cooperative Extension last year, with an approximate value of over \$16,000. Examples of activities include assisting with Extension programs such as Eat Smart for a Healthy Heart and Dining with Diabetes, judging 4-H foods at Delaware State Fair, developing and conducting Clueless in the Kitchen workshops, giving presentations at libraries throughout the county, and staffing both food safety and nutrition displays for public events.

#### 4. Associated Knowledge Areas

<b>KA Code</b>	<b>Knowledge Area</b>
703	Nutrition Education and Behavior
724	Healthy Lifestyle
903	Communication, Education, and Information Delivery

#### Outcome #2

##### 1. Outcome Measures

Targeted educational programs on understanding the causes of obesity and the means to reduce obesity for low-income communities, youth through after-school programs and childcare workers.

##### 2. Associated Institution Types

- 1862 Extension
- 1890 Extension

##### 3a. Outcome Type:

Change in Knowledge Outcome Measure

##### 3b. Quantitative Outcome

<b>Year</b>	<b>Actual</b>
2012	0

##### 3c. Qualitative Outcome or Impact Statement

###### **Issue (Who cares and Why)**

Low-income families often turn to unhealthy, ?empty? calorie, easy to prepare, convenience foods to feed their families, thus resulting in high obesity rates.

###### **What has been done**

Two federally-funded programs, the Expanded Food and Nutrition Education Program (EFNEP) and Supplemental Nutrition Assistance Program Education (SNAP-Ed) provide a minimum of 10 hours of interactive, hands-on education. The focus of both programs is on participants developing skills to make healthy food choices based on their budget, to use their resources wisely, to handle food safely, and to participate in physical activity each day. These programs empower individuals and families participating in the sessions to expand their horizons and to link diet, physical activity, and health together. The Extension Agent assists the State Food Specialist to administer this program, assuring that EFNEP nutrition assistants have the materials and supplies needed to perform their duties effectively. Data is collected, upon request by the EFNEP Coordinator, and supplies are organized, inventoried, and delivered state-wide. Extension Scholars are mentored and supervised during the summer months to deliver the youth camp

programs.

### Results

During 2011, participation in SNAP-Ed increased to 511 individuals compared to 406 individuals in 2010. When asked to rate their eating habits on a 10 point scale, 94 percent of the participants indicated a higher rating at the end of the class compared to the beginning of the class. Additionally, 66 and 63 percent of participants improved one or more nutrition and food resource management practices, respectively. Although initially 64 percent demonstrated acceptable food practices related to thawing and storing food properly, safe food handling practices improved among SNAP-Ed graduates with 36 percent reporting improvement in one or more food safety practices. FNEP reached 406 adults and 1,127 youth in 2011. Based on food recalls taken at the beginning of the program and at the end, improvement in intake of grains, fruits, vegetables, milk, and meat were noted by 37, 52, 62, 64, and 37 percent of participants, respectively. Of the families graduating in 2011, 85 percent improved at least one nutrition practice, 77 percent improved at least resource management practice, and 60 percent improved at least one food safety practice.

### 4. Associated Knowledge Areas

KA Code	Knowledge Area
702	Requirements and Function of Nutrients and Other Food Components
703	Nutrition Education and Behavior
724	Healthy Lifestyle
903	Communication, Education, and Information Delivery

### Outcome #3

#### 1. Outcome Measures

Increased number of program participants improving one or more nutrition practices.

#### 2. Associated Institution Types

- 1862 Extension
- 1890 Extension

#### 3a. Outcome Type:

Change in Action Outcome Measure

#### 3b. Quantitative Outcome

Year	Actual
2012	0

#### 3c. Qualitative Outcome or Impact Statement

### **Issue (Who cares and Why)**

Following a careful meal plan is the first step in controlling blood sugar. This is also the hardest step in diabetes control. This program helps those individuals with diabetes or pre-diabetes learn strategies to manage their diabetes through menu planning, carbohydrate counting, portion control and label reading.

### **What has been done**

Dining with Diabetes consists of three classes that provide diabetes education, cooking demonstrations and tasting of healthy foods. The first class focuses on desserts, the second class focuses on main dishes, and the last class focuses on side dishes. After each lesson the participant takes home recipes and diabetes resources, as well as knowledge on how they can manage their diabetes on a daily basis. This program teaches its participants about reducing sugar, salt and fat without giving up on taste. In New Castle County, a Cooperative Extension agent, who also maintains credentialing as a registered dietitian, up-dates the research, develops recipe grocery lists and specific talking points for recipes, coordinates the food preparation with assistance of an EFNEP Nutrition Assistant and Master Food Educators, reviews and up-dates the resources in the workshop take-home folders, explains homework assignments to childcare providers enrolled in the series, coordinates the demonstrators, assistants, and exercise leaders, providing specific talking points & direction, and delivers the subject matter via power point presentation for the three classes. Master Food Educators or nutrition students deliver the food demonstrations and serve the workshop participants.

### **Results**

Participants are given the tools, knowledge, and opportunity to improve their overall health. In 2012, a total of 22 individuals enrolled in the Dining with Diabetes workshop series in New Castle County. As a result, attendees reported eating more vegetables (40 percent), eating more fruits (40 percent), reading Nutrition Facts labels (40 percent), reading ingredient labels (70 percent), being more physically active (10 percent), more likely to eat on a regular basis (30 percent), and more likely to eat breakfast (30 percent). Furthermore, planning healthier meals, using different artificial sweeteners, and using better portion control were noted as additional ways to manage their diabetes by 40, 10, and 85 percent of participants, respectively.

## **4. Associated Knowledge Areas**

<b>KA Code</b>	<b>Knowledge Area</b>
702	Requirements and Function of Nutrients and Other Food Components
703	Nutrition Education and Behavior
903	Communication, Education, and Information Delivery

## **Outcome #4**

### **1. Outcome Measures**

Increased number of program participants who improve the frequency and quality of family meals.

Not Reporting on this Outcome Measure

## **Outcome #5**

### **1. Outcome Measures**

Increased number of program participants engaged in greater levels of physical activity

### **2. Associated Institution Types**

- 1862 Extension
- 1890 Extension

### **3a. Outcome Type:**

Change in Knowledge Outcome Measure

### **3b. Quantitative Outcome**

<b>Year</b>	<b>Actual</b>
2012	0

### **3c. Qualitative Outcome or Impact Statement**

#### **Issue (Who cares and Why)**

Kent County has the highest rate of heart disease in Delaware.

#### **What has been done**

Strong Women, Healthy Hearts, a 6 week 12 session physical activity and healthy eating program was offered at Wyoming United Methodist Church.

#### **Results**

Ninety percent of participants report eating more healthfully with the same percentage reporting that they have become more active.

### **4. Associated Knowledge Areas**

<b>KA Code</b>	<b>Knowledge Area</b>
724	Healthy Lifestyle
903	Communication, Education, and Information Delivery

## **Outcome #6**

### **1. Outcome Measures**

Reducing obesity in Delaware by extension programs that modify individual, family, and community behavior in a manner that promotes healthy lifestyles, physical activity on a regular basis, the consumption of healthy foods in appropriate quantities, and increasing family meals.

Not Reporting on this Outcome Measure

## **Outcome #7**

### **1. Outcome Measures**

Greater understanding, particularly in low-income communities and by youth, of the health risks associated with obesity and the options available to prevent or correct obesity problems.

Not Reporting on this Outcome Measure

## **V(H). Planned Program (External Factors)**

### **External factors which affected outcomes**

- Economy
- Appropriations changes
- Public Policy changes
- Government Regulations
- Competing Public priorities
- Competing Programmatic Challenges
- Populations changes (immigration, new cultural groupings, etc.)

### **Brief Explanation**

## **V(I). Planned Program (Evaluation Studies)**

### **Evaluation Results**

Evaluation of the Childhood Obesity planned program for FY12 (0.1 Research FTE, 19.5 Extension FTEs) shows a diverse and comprehensive extension effort to address the statewide issues associated with health, nutrition, diets, and families. Some particularly strong areas of extension programming include: (i) an integrated team effort to modify individual, family, and community behavior in a manner that promotes healthy lifestyles, encourages physical activity on a regular basis, promotes the consumption of healthy foods in appropriate quantities, and increases the frequency of family meals and (ii) an extensive set of programs for after-school children and childcare providers on healthy lifestyles and diets. Evaluations of extension programming showed continued excellent success in grants (8 of 12 submitted were awarded), the publication of 54 new fact sheets, 32 invited and volunteered presentations in local communities and at regional and national meetings,

and the presentation of more than 365 workshops. Our evaluations have included annual internal administrative reviews and numerous surveys and other evaluation methods conducted with stakeholders participating in workshops and other extension programs. Specific examples of stakeholder evaluation of these programs are provided in the "Outcomes" section of the FY12 annual report. Stakeholder feedback and internal reviews are quite positive and appreciative of the very comprehensive programs our Extension professionals have developed and are implementing widely and successfully today.

### **Key Items of Evaluation**

There are no major items requiring NIFA attention at this time, other than the continued need for more federal funding for research and extension programs that will help build on our current successes and allow us to reach more families and provide them with the skills needed to prevent or correct the serious problem of childhood obesity.