

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
703	Nutrition Education and Behavior	50%		0%	
724	Healthy Lifestyle	50%		0%	
	Total	100%		0%	

V(C). Planned Program (Inputs)

1. Actual amount of FTE/SYs expended this Program

Year: 2012	Extension		Research	
	1862	1890	1862	1890
Plan	2.0	0.0	1.0	0.0
Actual Paid Professional	3.8	0.0	0.0	0.0
Actual Volunteer	2.0	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
89690	0	0	0
1862 Matching	1890 Matching	1862 Matching	1890 Matching
0	0	0	0
1862 All Other	1890 All Other	1862 All Other	1890 All Other
559949	0	0	0

V(D). Planned Program (Activity)

1. Brief description of the Activity

The Childhood Obesity program previously known as the "Diet Physical Activity and Health Program"

has evolved over the years to become a household name within this U.S. protectorate. The CNMI is ranked 3rd in the nation for highest diabetes cases per capita. This ranking has brought about much needed collaboration among community groups as there are serious implications to such a high incidence of diabetes. The program although it is still just at its intermediate stage, through its sound outreach campaign has brought about partnerships locally, regionally, and nationally. A few of our partners include the Women Infants and Children Program (WIC), Supplemental Nutrition Assistance Program (SNAP), Diabetes Prevention and Control Program, Lets Move Marianas, CNMI Public School System (PSS), and The Childrens' Healthy Living Program (AFRI funded).

As there is no "silver bullet" approach to tackling a problem that requires a change in behavior NMC-CREES faculty use an array of educational tools in combatting such diseases as heart failure, stroke, hypertension, diabetes, gaut, cancer, obesity, etc. The difficulty of addressing such issues is compounded by the ease of acquiring fatty foods via "fast food chains and mom and pop stores," and the comfort of watching television on a "soft couch as opposed to the rigor of physical activity." It is for this reason that our outreach campaign has remained consistent over the years as such an issue requires more than one reporting period. As the purpose of reporting is to identify approaches that work, the ineffective methods, areas of growth, and most of all areas that need improvement, it is imperative that funding agencies realistically understand that some of the activities performed would require longer periods of application before measurable impact can be realized. The list below provides a glimpse of the different activities undertaken by program personnel to address our fight to reduce non-communicable diseases afflicting our stakeholders:

1. As a result of our collaborative networking with regional partners the the Childrens' Healthy Living Program (CHIL) we were able to provide 34 NMC nursing students with an internship opportunity that gives them the experiential learning opportunity in pediatrics.
2. Because of strengthened networking capabilities, the Childhood Obesity Program worked with University of Guam's Cancer Program on a study focused on "The effects of Betelnut use." As a result of funding allocated towards student experiential learning, 12 NMC nursing students participated by providing the study with the much needed technical personnel in completing the field studies and moving it on towards the final evaluation process. Such a study brings about the promise of greater understanding of the "possible" correlation between betelnut use and eventual mouth cancer.
3. As a result of program demand in the community, program personnel trained 54 childcare providers in the area of "Enhancing Nutrition in Day Cares." These early childhood centers play a crucial role in our community as they serve our underprivledge and poverished families as ranked by federal income guidelines.

Other Noteworthy Activities Performed:

- Monthly nutrition education exhibits at NAP issuance;
- Creation of CNMI Crop Calendar to provide PSS with a guideline for food and fiber available locally for distribution at their schools;
- Monthly promotion of physical activity (Walk Tinian);
- Conducted needs assesment at 6 sites totalling 12 focus groups for upcoming Childrens' Healthy Living Project;
- Periodic (Upon request, follow ups,) nutrition education lessons at Head Start facilities, elementary schools, townhall meetings, fairs, non-profit organization membership meetings on the islands of Saipan, Tinian, and Rota.

2. Brief description of the target audience

The target audience includes the general public, with a particular emphasis on areas of the islands that have a majority of its' residents at or below the poverty level. The program focused efforts but did not limit itself to considering the socio-economic status, educational attainment, and lifestyle of the general

public.

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	2300	12000	700	3000

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	1	0	1

V(F). State Defined Outputs

Output Target

Output #1

Output Measure

- Greater understanding of diet, physical activity, and health

Year	Actual
2012	54

Output #2

Output Measure

- Increase opportunities for physical activity

Year	Actual
2012	1

Output #3

Output Measure

- Improve nutrient intake of school meals among students at one elementary school
Not reporting on this Output for this Annual Report

V(G). State Defined Outcomes

V. State Defined Outcomes Table of Content

O. No.	OUTCOME NAME
1	Pilot "Recess Before Lunch" at one public elementary school
2	Lighting system will be turned on and available for use by the general public one night a week.
3	Social marketing/awareness campaign on the burden of non-communicable diseases/lifestyle diseases and role of diet and physical activity
4	Quantify progress in schools that participate in Youth Engaged in Advancing Health Project.

Outcome #1

1. Outcome Measures

Pilot "Recess Before Lunch" at one public elementary school

Not Reporting on this Outcome Measure

Outcome #2

1. Outcome Measures

Lighting system will be turned on and available for use by the general public one night a week.

Not Reporting on this Outcome Measure

Outcome #3

1. Outcome Measures

Social marketing/awareness campaign on the burden of non-communicable diseases/lifestyle diseases and role of diet and physical activity

2. Associated Institution Types

- 1862 Extension

3a. Outcome Type:

Change in Knowledge Outcome Measure

3b. Quantitative Outcome

Year	Actual
2012	12

3c. Qualitative Outcome or Impact Statement

Issue (Who cares and Why)

The fight against non-communicable diseases is a complex one that requires an array of strategies as it involves human behavioral changes.

What has been done

Program personnel has partnered with many regional, local, and national partners at addressing the problem via a strong awareness campaign. A few of the activities performed include, monthly NAP exhibits, presentations at community events, and public appearances at media outlets.

Results

85% of the 54 childcare providers that attended the workshops reported they now are providing healthier meals and snacks to children under their care. 60% of childcare administrators report that prior to the training they were unaware of the dietary guidelines set forth by USDA and now have begun making modifications as a result of their participation.

4. Associated Knowledge Areas

KA Code	Knowledge Area
703	Nutrition Education and Behavior
724	Healthy Lifestyle

Outcome #4

1. Outcome Measures

Quantify progress in schools that participate in Youth Engaged in Advancing Health Project.

Not Reporting on this Outcome Measure

V(H). Planned Program (External Factors)

External factors which affected outcomes

- Natural Disasters (drought, weather extremes, etc.)
- Economy
- Appropriations changes
- Public Policy changes
- Government Regulations
- Competing Public priorities
- Competing Programmatic Challenges
- Other (lack of collaboration)

Brief Explanation

1. Due to the budget constraints experienced by the CNMI Public School System the "Recess Before Lunch" initiative had difficulty with its anticipated launch date. As a result of the increase in utilities and overall lack of financial resources this particular partner chose to shorten the recess time allotted to students during lunch, thus creating this problematic situation for program personnel;

2. As a result of the central government's lack of resources and the overall economic conditions in the CNMI the "lighting project" was not considered a high priority at this particular juncture by our main partner (Department of Public Works), thus creating a snag.

The aforementioned issues are major issues that affect public policy. At this point in time, we do not foresee our economic conditions changing positively, thus there seems to be a need to reassess our current strategy.

V(I). Planned Program (Evaluation Studies)

Evaluation Results

Qualitative Evaluation was used by the State Extension Director---As one can see the program has made significant strides regardless of their small number of staff. This is evident in their ability to acquire competitive funding, their collaboration with other regional institutions, and the short term outcomes that are logically geared at addressing the program's long term goal of a "Healthy CNMI."

Key Items of Evaluation