

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

**Program # 4**

**1. Name of the Planned Program**

Childhood Obesity - Nutrition Education on Guam

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
701	Nutrient Composition of Food	15%			
702	Requirements and Function of Nutrients and Other Food Components	10%			
703	Nutrition Education and Behavior	20%			
704	Nutrition and Hunger in the Population	10%			
724	Healthy Lifestyle	25%			
802	Human Development and Family Well-Being	15%			
805	Community Institutions, Health, and Social Services	5%			
	<b>Total</b>	100%			

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

1. Actual amount of FTE/SYs expended this Program

Year: 2013	Extension		Research	
	1862	1890	1862	1890
Plan	4.0	0.0	0.0	0.0
Actual Paid Professional	1.5	0.0	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
67072	0	0	0
1862 Matching	1890 Matching	1862 Matching	1890 Matching
48549	0	0	0
1862 All Other	1890 All Other	1862 All Other	1890 All Other
23897	0	0	0

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

#### 1. Brief description of the Activity

Activities for this program in 2013 included: (1) conducted basic nutrition education classes on topics that relate to nutrition and food which include: 'MyPyramid'; Food Safety (Kitchen & Safe Food Handling); Importance of Exercise; Fruits & Vegetables (Vitamins); Shopping Tips; Budgeting; meal Planning; Reading Food labels; promoting use of herbs and spices to help reduce the intake of salts, fats and sugars; and chronic disease prevention. (2) Conducted nutrition workshops to target population. (3) Developed culturally relevant curriculum for promoting physical activity; education to prevent obesity; localized general nutrition education materials (brochures/pamphlets) and also develop a curriculum on food portion control and over-eating. (4) Developed recipe books that feature favorite local recipes. (5) Created a local recipe book that incorporates healthful modifications of local dishes. (6) Conducted food demonstrations on local dishes that incorporate healthful modifications. (7) Developed booklet and calendar that identifies locally grown fruits and vegetables with high nutritive value and suggest ways to healthful ways to prepare the local produce. (8) Conducted workshops promoting locally grown fruits and vegetables with healthful recipes for both farmers and experienced cooks, and marketing healthful recipes with locally grown produce. (9) Maintained partnerships with local food source businesses to promote a greater variety of healthful foods and education awareness within food source facilities. (10) Developed and disseminated fact sheets of common causes of preventable chronic diseases that are prevalent on Guam and showed how it is related to poor lifestyle choices. (11) Developed and disseminated health and nutrition education curriculum for chronic disease prevention along with educational materials.

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

The target audiences of the program include: (1) school-aged children (elementary through high school level); (2) families in public assistance programs; (3) families with young children; (4) general consumers; (5) military families; (6) health educators; (7) school teachers; (8) local farmers; (9) working professionals; (10) other groups requesting services.

#### 3. How was eXtension used?

eXtension was not used in this program

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

#### 1. Standard output measures

2013	Direct Contacts Adults	Indirect Contacts Adults	Direct Contacts Youth	Indirect Contacts Youth
<b>Actual</b>	435	1301	2431	685

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

**Patent Applications Submitted**

Year: 2013

Actual: 0

**Patents listed**

**3. Publications (Standard General Output Measure)**

**Number of Peer Reviewed Publications**

2013	Extension	Research	Total
<b>Actual</b>	0	0	0

**V(F). State Defined Outputs**

**Output Target**

**Output #1**

**Output Measure**

- # of workshops

Year	Actual
2013	136

**Output #2**

**Output Measure**

- # of brochures

Year	Actual
2013	1

**Output #3**

**Output Measure**

- # of dissemination of research results and new technology and information

<b>Year</b>	<b>Actual</b>
2013	104

**Output #4**

**Output Measure**

- # of one to one intervention

<b>Year</b>	<b>Actual</b>
2013	104

**Output #5**

**Output Measure**

- # of focus group

<b>Year</b>	<b>Actual</b>
2013	21

**Output #6**

**Output Measure**

- # of work with media

<b>Year</b>	<b>Actual</b>
2013	4

**Output #7**

**Output Measure**

- # of articles in newsletter, magazines, and newspapers

<b>Year</b>	<b>Actual</b>
2013	9

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

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

O. No.	OUTCOME NAME
1	# of participants exposed to nutrition, exercise, and obesity prevention information
2	# of participants gaining an increase in physical activity knowledge and skills, especially as it pertains to maintaining mental and physical well-being, prevention of chronic disease, and improving overall health
3	# of participants who have been exposed to health and nutrition education for chronic disease prevention
4	# of children on Guam will practice healthy eating patterns
5	# of families, children, and youth have access to healthy food

## **Outcome #1**

### **1. Outcome Measures**

# of participants exposed to nutrition, exercise, and obesity prevention information

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

- 1862 Extension

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

Change in Condition Outcome Measure

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

<b>Year</b>	<b>Actual</b>
2013	1270

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

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

The data from the Guam Department of Public Health and Social Services, Office of Vital Statistics continue to indicate that high numbers of chronic and preventable diseases such as type 2 diabetes, cardiovascular disease and certain types of cancer are the primary causes of death on Guam. We continue to see the need for preventive nutrition education programs and services as they relate to the promotion of healthy diets and lifestyle habits for the whole community of Guam.

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

Nutrition education workshops for: 1) families with young children in public assistance programs; 2) families who may not receive public assistance but fall into the 'low income' category; 3) youths in Guam schools, including after-school programs and other youth related programs; 4) Nutrition, Fitness and Fun Summer Camp; and 5) nutrition education workshops for the elderly in our community. Additional education efforts include: 1) static nutrition and health displays during island health fairs; 2) monthly (in-store) food demonstrations; and 3) distribution of nutrition education materials which provide information on how to stay healthy and prevent chronic diseases.

#### **Results**

A total of 1,270 had an increase in nutrition and health knowledge.

## **4. Associated Knowledge Areas**

<b>KA Code</b>	<b>Knowledge Area</b>
701	Nutrient Composition of Food
702	Requirements and Function of Nutrients and Other Food Components

703	Nutrition Education and Behavior
704	Nutrition and Hunger in the Population
724	Healthy Lifestyle
802	Human Development and Family Well-Being
805	Community Institutions, Health, and Social Services

## **Outcome #2**

### **1. Outcome Measures**

# of participants gaining an increase in physical activity knowledge and skills, especially as it pertains to maintaining mental and physical well-being, prevention of chronic disease, and improving overall health

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

- 1862 Extension

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

Change in Condition Outcome Measure

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

<b>Year</b>	<b>Actual</b>
2013	1270

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

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

The continuous rise in obesity prevalence and associated complications on Guam is linked to the lack of nutrition and health education. Obviously, there is a need for increased nutrition and health knowledge and skills. Through nutrition education, the people of Guam would be better informed on the many health benefits of proper nutritional intake of foods and the importance of regular exercise as it too links to good health.

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

Nutrition education workshops for: 1) families with young children in public assistance programs; 2) families who may not receive public assistance but fall into the 'low income' category; 3) youths in Guam schools, including after-school programs and other youth related programs; 4) Nutrition, Fitness and Fun Summer Camp; and 5) nutrition education workshops for the elderly in our community. Additional education efforts include: 1) static nutrition and health displays during island health fairs; 2) monthly (in-store) food demonstrations; and 3) distribution of nutrition education materials which provide information on how to stay healthy and prevent chronic diseases.

#### **Results**

Pre- and post-tests showed that 96% of participants increased in nutrition skills in one or more

lessons.

#### 4. Associated Knowledge Areas

KA Code	Knowledge Area
701	Nutrient Composition of Food
702	Requirements and Function of Nutrients and Other Food Components
703	Nutrition Education and Behavior
704	Nutrition and Hunger in the Population
724	Healthy Lifestyle
802	Human Development and Family Well-Being
805	Community Institutions, Health, and Social Services

#### Outcome #3

##### 1. Outcome Measures

# of participants who have been exposed to health and nutrition education for chronic disease prevention

##### 2. Associated Institution Types

- 1862 Extension

##### 3a. Outcome Type:

Change in Knowledge Outcome Measure

##### 3b. Quantitative Outcome

Year	Actual
2013	104

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

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

A sedentary lifestyle and poor food choices are linked to the increase number of Guam residents who suffer from chronic and preventable diseases such as obesity, diabetes, cardiovascular diseases, and cancer. Obviously, there is a need for increased physical activity, nutrition and health knowledge and skills. By providing proper health and nutrition education that not only increases knowledge and awareness, but also improves skills associated with increased physical activity and improved lifestyle habits, the number of Guam residents affected by these preventable conditions may be decreased.

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

Nutrition education workshops for: 1) families with young children in public assistance programs; 2) families who may not receive public assistance but fall into the 'low income' category; 3) youths in Guam schools, including after-school programs and other youth related programs; 4) Nutrition, Fitness and Fun Summer Camp; and 5) nutrition education workshops for the elderly in our community. Additional education efforts include: 1) static nutrition and health displays during island health fairs; 2) monthly (in-store) food demonstrations; and 3) distribution of nutrition education materials which provide information on how to stay healthy and prevent chronic diseases.

### **Results**

Pre- and post test and follow-up surveys indicate that about 91% of participants in one or more education session have adopted skills and knowledge and are leading healthier lives.

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

<b>KA Code</b>	<b>Knowledge Area</b>
703	Nutrition Education and Behavior
724	Healthy Lifestyle
805	Community Institutions, Health, and Social Services

### **Outcome #4**

#### **1. Outcome Measures**

# of children on Guam will practice healthy eating patterns

Not Reporting on this Outcome Measure

### **Outcome #5**

#### **1. Outcome Measures**

# of families, children, and youth have access to healthy food

Not Reporting on this Outcome Measure

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

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

- 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**

{No Data Entered}

**Key Items of Evaluation**

{No Data Entered}