

V(A). Planned Program (Summary)

Program # 9

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%	
704	Nutrition and Hunger in the Population	10%		0%	
724	Healthy Lifestyle	40%		0%	
803	Sociological and Technological Change Affecting Individuals, Families, and Communities	0%		100%	
Total		100%		100%	

V(C). Planned Program (Inputs)

1. Actual amount of FTE/SYs expended this Program

Year: 2013	Extension		Research	
	1862	1890	1862	1890
Plan	1.0	0.0	1.0	0.0
Actual Paid Professional	0.3	0.0	0.1	0.0
Actual Volunteer	0.6	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
3433	0	150	0
1862 Matching	1890 Matching	1862 Matching	1890 Matching
35286	0	5613	0
1862 All Other	1890 All Other	1862 All Other	1890 All Other
13397	0	0	0

V(D). Planned Program (Activity)

1. Brief description of the Activity

Health and wellness have long been issues for Hawai'i's communities. The high cost of living in Hawai'i and the resulting need for multiple incomes in the household reduce time and energy available for food preparation, leading to greater consumption of fast food. In addition, cultural practices in Hawai'i place emphasis on food consumption as a part of virtually all social activities, and the local diet is high in starch (e.g., white rice, macaroni salad) and fat (e.g., processed meat products, fried items). Although traditional health and wellness programming in CTAHR has focused on adults, growing concern over childhood obesity is shifting the focus to youth. For example, the rate of obesity in children in Hawai'i ages 6 to 11 is twice the national average. CTAHR faculty participate in regional and national efforts to identify the factors contributing to weight gain in young children, particularly in low-income households in order to develop obesity prevention programs.

Today's hectic lifestyles often lead parents and caregivers to make less-than-desirable food choices for meals. Obesity and being overweight has reached epidemic proportion in the United States. These conditions are key factors for chronic diseases, such as heart disease, diabetes, arthritis, high blood pressure, stroke and some types of cancer. The leading causes of these conditions are poor diet and lack of physical activity. Unhealthy eating habits and lack of physical activity can begin at an early age. Parents have a strong and sustained influence on children's habits and access to food and recreational activities. Youth are easily influenced by media and their friends. Hawaii 4-H extension faculty developed and conducted the "I Take Charge Of My Health" program, consisting of educational workshops for youth and adults on the importance of regular physical exercise to build healthy bodies and eating foods the My Plate way. Participants have indicated improvement in their food choices and an increase in their physical activity level.

The Childrens' Healthy Living Program for Remote Underserved Minority Populations of the Pacific (CHL), supported by a five-year CAP grant from USDA, is a major effort to integrative research on diet and obesity promoting factors in native Pacific populations with prevention problems and culturally appropriate community-scale interventions in Hawaii, American Samoa, Northern Marianas, Guam, Micronesia and Alaska. A local advisory committee steers and supports program efforts in each location. In FY2013, baseline data collection of child health metrics and activity measurements were completed in both treatment (intervention) and control communities in each region, and participants and procedures were finalized in preparation for initiation of programming in FY2014. The intervention techniques resulting from this community-guided program will be of great value in reducing obesity incidence in at-risk Pacific Islander and Native Alaskan populations.

Childhood obesity and incidence of diabetes are correlated health concerns. Choosing foods that are high in dietary fiber aids in weight loss and improves blood glucose control. Rice is a primary starch in Hawaii, and research efforts focused on quantification of dietary fiber content, as measured by resistant starch, in different rice varieties and with different cooking methods. A high resistant and low resistant variety were selected for clinical trials. Three community presentations were also given to 180 participants emphasizing the importance of including adequate dietary fiber from a variety of local food sources.

2. Brief description of the target audience

Target audiences are food producers and retailers, caregivers, and members of the public (particularly those from Pacific lineages at risk from diabetes) participating in community wellness programs and community development programs such as 4H. Current programs focus on children and families from at-risk native populations in communities in Hawaii, and across the Pacific region.

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
Actual	395	1598	514	741

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
Actual	0	1	1

V(F). State Defined Outputs

Output Target

Output #1

Output Measure

- Number of workshops, filed days, or demonstrations conducted.

Year	Actual
2013	8

Output #2

Output Measure

- Presentations at national and international meetings.

Year	Actual
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2013 0

Output #3

Output Measure

- Grant proposals submitted.

Year	Actual
2013	0

V(G). State Defined Outcomes

V. State Defined Outcomes Table of Content

O. No.	OUTCOME NAME
1	Number of stakeholders who increased knowledge in at least one issue.
2	Number of stakeholders completing non-formal education programs on childhood obesity issues.
3	Dollar value of grants and contracts obtained.

Outcome #1

1. Outcome Measures

Number of stakeholders who increased knowledge in at least one issue.

2. Associated Institution Types

- 1862 Extension

3a. Outcome Type:

Change in Knowledge Outcome Measure

3b. Quantitative Outcome

Year	Actual
2013	1202

3c. Qualitative Outcome or Impact Statement

Issue (Who cares and Why)

Information is needed by children, parents and health professionals on best means of reducing childhood obesity in Hawaii and the Pacific Region.

What has been done

Stakeholders have received appropriate information on reducing childhood obesity through improved diet and increased exercise through workshops, demonstrations, extension publications and nutrition website. Partnerships have been established with other Pacific basin jurisdictions.

Results

Children in Hawaii have begun to change their behavior and are losing weight in a healthy manner. Infrastructure is being developed with collaborating jurisdictions to implement an effective childrens healthy living (CHL) program throughout the Pacific Region.

4. Associated Knowledge Areas

KA Code	Knowledge Area
703	Nutrition Education and Behavior
704	Nutrition and Hunger in the Population
724	Healthy Lifestyle

Outcome #2

1. Outcome Measures

Number of stakeholders completing non-formal education programs on childhood obesity issues.

2. Associated Institution Types

- 1862 Extension
- 1862 Research

3a. Outcome Type:

Change in Knowledge Outcome Measure

3b. Quantitative Outcome

Year	Actual
2013	214

3c. Qualitative Outcome or Impact Statement

Issue (Who cares and Why)

Information is needed by children, parents and health professionals on best means of reducing childhood obesity in Hawaii and the Pacific Region.

What has been done

Stakeholders have received appropriate information on reducing childhood obesity through improved diet and increased exercise through workshops, demonstrations, extension publications and nutrition websites. Partnerships have been established with other Pacific basin jurisdictions.

Results

Children in Hawaii have begun to change their behavior and are losing weight in a healthy manner. Infrastructure is being developed with collaborating jurisdictions to implement an effective childrens healthy living (CHL) program throughout the Pacific Region.

4. Associated Knowledge Areas

KA Code	Knowledge Area
703	Nutrition Education and Behavior
704	Nutrition and Hunger in the Population
724	Healthy Lifestyle

Outcome #3

1. Outcome Measures

Dollar value of grants and contracts obtained.

2. Associated Institution Types

- 1862 Extension
- 1862 Research

3a. Outcome Type:

Change in Action Outcome Measure

3b. Quantitative Outcome

Year	Actual
2013	5085672

3c. Qualitative Outcome or Impact Statement

Issue (Who cares and Why)

Resources are needed to organize and implement healthy living and obesity prevention programs for children in Hawaii and the Pacific Basin.

What has been done

Resources were solicited to promote healthy living and develop and implement methods and tools to combat childhood obesity.

Results

Resources were obtained, including a NIFA CAP grant to promote healthy living and develop and implement methods and tools to combat childhood obesity.

4. Associated Knowledge Areas

KA Code	Knowledge Area
703	Nutrition Education and Behavior
704	Nutrition and Hunger in the Population
724	Healthy Lifestyle
803	Sociological and Technological Change Affecting Individuals, Families, and Communities

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

This is relatively new program area for the college. State and federal regulations governing the inclusion of children in research can cause delays in program initiation and implementation.

V(I). Planned Program (Evaluation Studies)

Evaluation Results

All projects conducted under this program were peer-reviewed before initiation. Annual progress reports were collected and evaluated by the associate deans for research and extension. Funds are not released for those projects which did not show tangible progress.

Key Items of Evaluation

None.