

V(A). Planned Program (Summary)

Program # 4

1. Name of the Planned Program

Childhood Obesity: Healthy Eating and Physical Activity through the Lifespan

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	5%		35%	
703	Nutrition Education and Behavior	70%		55%	
724	Healthy Lifestyle	20%		0%	
802	Human Development and Family Well-Being	5%		10%	
	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	56.0	0.0	5.0	0.0
Actual Paid Professional	56.0	0.0	5.0	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
34569	0	299556	0
1862 Matching	1890 Matching	1862 Matching	1890 Matching
175608	0	2279718	0
1862 All Other	1890 All Other	1862 All Other	1890 All Other
4506222	0	282492	0

V(D). Planned Program (Activity)

1. Brief description of the Activity

Educational programs about making healthy food choices and increasing physical activity

2. Brief description of the target audience

* Families and individuals of all ages living in Kansas, including populations with limited resources; low literacy skills; varying ethnicities; disabilities, diseases, or impairments; and documented or identifiable health disparities; * Economic stakeholders, and policy and funding agencies; * Health care, education, and nutrition professionals; KSRE faculty and staff with responsibilities for food and/or nutrition; * Consumer groups (i.e., STOP)

3. How was eXtension used?

Extension educators received notice of eXtension seminars relevant to their education programming.

V(E). Planned Program (Outputs)

1. Standard output measures

2013	Direct Contacts Adults	Indirect Contacts Adults	Direct Contacts Youth	Indirect Contacts Youth
Actual	63000	0	21000	0

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	2	5	7

V(F). State Defined Outputs

Output Target

Output #1

Output Measure

- Number of workshop series conducted

Year	Actual
2013	15

V(G). State Defined Outcomes

V. State Defined Outcomes Table of Content

O. No.	OUTCOME NAME
1	Children and youth increase their physical activity and/or reduce sedentary time. (Measured by percentage of number reached)
2	Youths increase fruit and vegetable consumption (Measured by number reporting increase)
3	Adolescents reporting healthier lifestyle habits (e.g., eating meals from a variety of food groups; increased frequency and/or time spent participating in physical activity per day) (Measured by increased percentage of those reached)
4	School-aged youth become more physically active (i.e., 60 minutes of moderate activity each day) and decrease screen time (e.g., tv, computer, video games) to less than 2 hours each day
5	Children and youth increase consumption of foods as recommended by the U.S. Dietary Guidelines for Americans, such as increasing vegetables, fruits (Measured by percentage of those reached)
6	Families/caregivers adopt healthy eating patterns, such as eating breakfast, eating as a family, healthier snack choices (Measured by percentage of those reached)
7	Children and youth increase consumption of foods as recommended by the U.S. Dietary Guidelines for Americans, such as increasing whole grains (Measured by percentage of those reached)
8	Kansans of all ages engage in increased physical activity (measured by number of participants in Walk Kansas).

Outcome #1

1. Outcome Measures

Children and youth increase their physical activity and/or reduce sedentary time. (Measured by percentage of number reached)

Not Reporting on this Outcome Measure

Outcome #2

1. Outcome Measures

Youths increase fruit and vegetable consumption (Measured by number reporting increase)

Not Reporting on this Outcome Measure

Outcome #3

1. Outcome Measures

Adolescents reporting healthier lifestyle habits (e.g., eating meals from a variety of food groups; increased frequency and/or time spent participating in physical activity per day) (Measured by increased percentage of those reached)

2. Associated Institution Types

- 1862 Extension
- 1862 Research

3a. Outcome Type:

Change in Action Outcome Measure

3b. Quantitative Outcome

Year	Actual
2013	0

3c. Qualitative Outcome or Impact Statement

Issue (Who cares and Why)

What has been done

School-based physical activity and nutrition initiatives can reach a large and diverse number of Kansas children. Kansas Schools participating in the National School Meals Program have implemented Local Wellness Policies focused on nutrition guidelines for food available to students in schools, nutrition education, and physical activity. KSRE was listed in the Kansas

Department of Education Wellness Model Guidelines as an approved provider of nutrition education for schools. Additionally, the national 4-H Healthy Living Mission Mandate seeks to engage youth and Program Focus Team Action Plan: Promote Healthy Eating and Physical Activity through opportunities that achieve physical, social and emotional well-being.

Results

By supporting health-related programs for adolescents, 4-H Healthy Living encourages all youth to adopt healthy eating and physical fitness habits.

4. Associated Knowledge Areas

KA Code	Knowledge Area
703	Nutrition Education and Behavior
724	Healthy Lifestyle
802	Human Development and Family Well-Being

Outcome #4

1. Outcome Measures

School-aged youth become more physically active (i.e., 60 minutes of moderate activity each day) and decrease screen time (e.g., tv, computer, video games) to less than 2 hours each day

Not Reporting on this Outcome Measure

Outcome #5

1. Outcome Measures

Children and youth increase consumption of foods as recommended by the U.S. Dietary Guidelines for Americans, such as increasing vegetables, fruits (Measured by percentage of those reached)

2. Associated Institution Types

- 1862 Extension

3a. Outcome Type:

Change in Action Outcome Measure

3b. Quantitative Outcome

Year	Actual
2013	51

3c. Qualitative Outcome or Impact Statement

Issue (Who cares and Why)

The Family Nutrition Program (Kansas' name for the Supplemental Nutrition Assistance Program Education) helps families and individuals improve the likelihood that those eligible for the Kansas Food Assistance Program (formerly known as Food Stamps) will make healthy food choices within a limited budget, and choose physically active lifestyles consistent with the current Dietary Guidelines for Americans and MyPlate/MyPyramid.

What has been done

After completing a series of FNP lessons, Youth FNP participants were asked to select ways for eating more fruits and vegetables. Of the almost 3000 participants, 63.7% were able to correctly select all of the above (including eating an apple for dessert, making a banana smoothie, and using carrots and celery sticks for dipping) in the post-survey, a 7.2% increase in correct responses over the pre-survey.

Results

Participants also compared how often they eat meals that include a variety of foods before FNP lessons, to their intentions after the program. More than 50% participants reported intentions to increase the frequency with which they eat a variety of foods at each meal.

4. Associated Knowledge Areas

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

Outcome #6

1. Outcome Measures

Families/caregivers adopt healthy eating patterns, such as eating breakfast, eating as a family, healthier snack choices (Measured by percentage of those reached)

2. Associated Institution Types

- 1862 Extension

3a. Outcome Type:

Change in Action Outcome Measure

3b. Quantitative Outcome

Year	Actual
2013	97

3c. Qualitative Outcome or Impact Statement

Issue (Who cares and Why)

Poor dietary habits ? low intake of fruits and vegetables, increased portion sizes, or increased consumption of sweetened beverages ? have been linked to conditions such as obesity, diabetes, hypertension, stroke, heart disease, certain cancers, respiratory disorders, joint problems, and osteoporosis. Nutrition education is important for the overall health of Kansans of all ages.

What has been done

Agents from K-State Research and Extension, along with Master Food Volunteers, provided educational programs and workshops using a variety of curricula. Programs included series such as Emotional Eating, Cook Once ? Eat for a Month, and Dining with Diabetes, as well as adult/ youth cooking activities. The programs focus on nutrition and cooking, providing participants with knowledge and skills to improve their health, reduce or manage chronic disease, and manage resources.

Results

Of the 516 participants who responded to survey questions at the end of a nutrition education program, 97% indicated they had gained knowledge for improving their health, eating healthfully, managing chronic diseases, and managing food-related resources.

4. Associated Knowledge Areas

KA Code	Knowledge Area
703	Nutrition Education and Behavior
724	Healthy Lifestyle
802	Human Development and Family Well-Being

Outcome #7

1. Outcome Measures

Children and youth increase consumption of foods as recommended by the U.S. Dietary Guidelines for Americans, such as increasing whole grains (Measured by percentage of those reached)

Not Reporting on this Outcome Measure

Outcome #8

1. Outcome Measures

Kansans of all ages engage in increased physical activity (measured by number of participants in Walk Kansas).

2. Associated Institution Types

- 1862 Extension

3a. Outcome Type:

Change in Action Outcome Measure

3b. Quantitative Outcome

Year	Actual
2013	15709

3c. Qualitative Outcome or Impact Statement

Issue (Who cares and Why)

Healthy lifestyle choices such as being physically active, eating more healthfully, maintaining a healthy weight, and managing stress more effectively, can delay onset of chronic disease and even prevent it. Lifestyle habits also play a key role in managing symptoms of these diseases.

What has been done

K-State Research and Extension (KSRE) Family and Consumer Sciences professionals provided leadership in working with local partners (e.g., community task forces, agencies, service groups, schools, faith based groups, employers) to offer Walk Kansas in 2012. This program is an evidence-based model that is adapted each year to reflect current nutrition and physical activity 3guidelines and research findings.

Results

87% were more physically active as a result of the program, and 81% met activity goals; 69% were confident or completely confident they would continue this amount of activity during the next 6 months.

85% are more aware of healthy eating recommendations, and 76% increased fruit and vegetable consumption during the period.

71% were confident/completely confident they would continue this habit during the next 6 months. 61% drank more water every day, replacing beverages high in sugar.

4. Associated Knowledge Areas

KA Code	Knowledge Area
703	Nutrition Education and Behavior
724	Healthy Lifestyle
802	Human Development and Family Well-Being

V(H). Planned Program (External Factors)

External factors which affected outcomes

- Economy
- Appropriations changes
- Public Policy changes
- Government Regulations
- Competing Programmatic Challenges

Brief Explanation

{No Data Entered}

V(I). Planned Program (Evaluation Studies)

Evaluation Results

{No Data Entered}

Key Items of Evaluation

{No Data Entered}