

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

**Program # 4**

**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
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 and Social Services	5%			
	<b>Total</b>	100%			

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

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

Year: 2014	Extension		Research	
	1862	1890	1862	1890
<b>Plan</b>	4.0	0.0	0.0	0.0
<b>Actual Paid</b>	4.0	0.0	0.0	0.0
<b>Actual Volunteer</b>	0.1	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
235431	0	0	0
1862 Matching	1890 Matching	1862 Matching	1890 Matching
117716	0	0	0
1862 All Other	1890 All Other	1862 All Other	1890 All Other
0	0	0	0

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

**1. Brief description of the Activity**

(1) provide basic nutrition education classes on topics that relate to nutrition and food which include: 'MyPlate'; 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) Conduct nutrition workshops to target population. (3) Develop 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) Develop recipe books that feature favorite local recipes. (5) Create a local recipe book that incorporates healthful modifications of local dishes. (6) Conduct food demonstrations on local dishes that incorporate healthful modifications. (7) Update calendar poster that identifies locally grown fruits and vegetables with high nutritive value and suggest ways to healthful ways to prepare the local produce. (8) Promote increase water consumption. (9) Promote decrease recreational screen time. (10) Promote the decrease consumption of sugar-sweetened beverages. (11) Conduct workshops promoting locally grown fruits and vegetables with healthful recipes for both farmers and experienced cooks (marketing healthful recipes with locally grown produce). (12) Maintain partnership with local food sources businesses to promote a greater variety of healthful foods and education awareness within food source facilities. (13) Develop and disseminate fact sheets of common causes of preventable chronic diseases that are prevalent on Guam and show how related to poor lifestyle choices. (14) Develop and disseminate 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) senior citizens and their support groups, (11) other groups requesting services.

**3. How was eXtension used?**

Used for gathering information on school/community gardens. Gathering resources to find USDA diet recommendations.

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

**1. Standard output measures**

2014	Direct Contacts Adults	Indirect Contacts Adults	Direct Contacts Youth	Indirect Contacts Youth
<b>Actual</b>	2042	15910	6553	10501

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

Year: 2014  
 Actual: 0

**Patents listed**

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

**Number of Peer Reviewed Publications**

2014	Extension	Research	Total
<b>Actual</b>	0	2	0

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

**Output Target**

**Output #1**

**Output Measure**

- # of workshops

Year	Actual
2014	327

**Output #2**

**Output Measure**

- # of brochures

Year	Actual
2014	7

**Output #3**

**Output Measure**

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

<b>Year</b>	<b>Actual</b>
2014	0

**Output #4**

**Output Measure**

- # of one to one intervention

<b>Year</b>	<b>Actual</b>
2014	327

**Output #5**

**Output Measure**

- # of focus group

<b>Year</b>	<b>Actual</b>
2014	2

**Output #6**

**Output Measure**

- # of work with media

<b>Year</b>	<b>Actual</b>
2014	7

**Output #7**

**Output Measure**

- # of articles in newsletter, magazines, and newspapers

<b>Year</b>	<b>Actual</b>
2014	6

**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 Knowledge Outcome Measure

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

<b>Year</b>	<b>Actual</b>
2014	5101

### **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; 5) Use of SPARK (sports, play, and active recreation for kids) for elementary schools, and Fun with New Foods and Mighty Moves curriculum for pre-schools; 6) Healthy Village Weight Initiative, Role Model Training, mini-grant program that supported healthy-living initiatives, and 7) 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 5,101 adults and children had been exposed to nutrition, exercise, and obesity prevention information.

### **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
724	Healthy Lifestyle
802	Human Development and Family Well-Being
805	Community Institutions 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 Knowledge Outcome Measure

**3b. Quantitative Outcome**

<b>Year</b>	<b>Actual</b>
2014	5690

**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**

Physical 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; 5) Use of SPARK (sports, play, and active recreation for kids) for elementary schools, and Fun with New Foods and Mighty Moves curriculum for pre-schools; 6) Healthy Village Weight Initiative, Role Model Training, mini-grant program that supported healthy-living initiatives.

**Results**

5690 individuals were exposed to physical activity knowledge and skills.

**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
724	Healthy Lifestyle
802	Human Development and Family Well-Being
805	Community Institutions 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**

<b>Year</b>	<b>Actual</b>
2014	5690

**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; 5) Use of SPARK (sports, play, and active recreation for kids) for elementary schools, and Fun with New Foods and Mighty Moves curriculum for pre-schools; 6) Healthy Village Weight Initiative, Role Model Training, mini-grant program that supported healthy-living initiatives, and 7) 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 sampling of EFNEP youth data, for example, of 475 youth (of the total of 5690 exposures) indicates that about 93% of young participants adopted and practiced one or more food selection behaviors consistent with federal dietary guideline recommendations.

**4. Associated Knowledge Areas**

<b>KA Code</b>	<b>Knowledge Area</b>
703	Nutrition Education and Behavior
724	Healthy Lifestyle
805	Community Institutions 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.)
- Other (Vacant nutrition faculty position.)

### **Brief Explanation**

In hindsight, being able to track our last two goals: number of children on Guam will practice healthy eating patterns, and number of families, children, and youth have access to healthy food, seems to be out of our capability and purview. What we realize we can do is inform, educate, and demonstrate healthy behaviors and food choices.

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

### **Evaluation Results**

Our major nutrition education effort is EFNEP. EFNEP does not really partake in evaluative studies of behavioral change. We are, however, participating in the USDA-NIFA competitively-funded Children's Healthy Living (CHL) Program. This program is measuring the impacts of educational intervention and will be reported under that program.

### **Key Items of Evaluation**

Extension professionals and researchers have been bringing together different disciplines in the college and the community to shine a light on the issue of childhood, and adult, obesity in Guam. Naturally, it has take a while to collect data, create educational materials, and reorient the team to focus on a larger, inter-connected issue. We will continue to move along this pathway, with our partners, as getting a handle on health issues in Guam is one of our college priorities.