V(A). Planned Program (Summary)

Program # 10

1. Name of the Planned Program

Childhood Obesity

V(B). Program Knowledge Area(s)

1. Program Knowledge Areas and Percentage

<table>
<thead>
<tr>
<th>KA Code</th>
<th>Knowledge Area</th>
<th>%1862 Extension</th>
<th>%1890 Extension</th>
<th>%1862 Research</th>
<th>%1890 Research</th>
</tr>
</thead>
<tbody>
<tr>
<td>703</td>
<td>Nutrition Education and Behavior</td>
<td>100%</td>
<td>100%</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>100%</td>
<td>100%</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

V(C). Planned Program (Inputs)

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

<table>
<thead>
<tr>
<th>Year: 2009</th>
<th>Extension</th>
<th>Research</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>1862</td>
<td>1890</td>
</tr>
<tr>
<td>Actual</td>
<td>0.0</td>
<td>0.0</td>
</tr>
</tbody>
</table>

2. Actual dollars expended in this Program (includes Carryover Funds from previous years)

<table>
<thead>
<tr>
<th>Extension</th>
<th>Research</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>Smith-Lever 3b &amp; 3c</td>
<td>Hatch</td>
</tr>
<tr>
<td>1890</td>
<td>0</td>
</tr>
<tr>
<td>1862 Matching</td>
<td>0</td>
</tr>
<tr>
<td>1890 Matching</td>
<td>0</td>
</tr>
<tr>
<td>1862 All Other</td>
<td>0</td>
</tr>
<tr>
<td>1890 All Other</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

V(D). Planned Program (Activity)

1. Brief description of the Activity

This is a new planned program added to the University of Wyoming's efforts. Any outputs and outcomes are reported under Nutrition and Health. As UW CES and AES transition to this new planned program, EFNEP youth curricula will be taught in a series of lessons and day camps; displays and demonstrations; State and community partnerships with agencies serving the youth; training for educators; evaluation of program; Ongoing- updating of curricula and materials.

Other nutrition efforts will focus on educational programs which increase knowledge and skills in nutrition needs of children and incorporate physical activity into lifestyle; media outreach; health fairs; training; assessment/data collection.

Programs which teach body size acceptance will also be targeted to youth.

2. Brief description of the target audience

The University of Wyoming is committed to reaching underrepresented groups and individuals and to implementing the objectives of equal opportunity regulations relative to the consideration and treatment of clientele for participation in all programs regardless of their race, national origin, gender, age, religion, or disability. Specific target audience are 4-H youth; groups for the CNP (EFNEP) program: parents, adults, low-income youth, teachers and other professionals in youth serving agencies. All other nutrition efforts targeted audience includes: general public, both adults and youth and policy makers.

V(E). Planned Program (Outputs)
1. Standard output measures

<table>
<thead>
<tr>
<th>2009</th>
<th>Direct Contacts Adults</th>
<th>Indirect Contacts Adults</th>
<th>Direct Contacts Youth</th>
<th>Indirect Contacts Youth</th>
</tr>
</thead>
<tbody>
<tr>
<td>Plan</td>
<td>{NO DATA ENTERED}</td>
<td>{NO DATA ENTERED}</td>
<td>{NO DATA ENTERED}</td>
<td>{NO DATA ENTERED}</td>
</tr>
<tr>
<td>Actual</td>
<td>1150</td>
<td>2000</td>
<td>4449</td>
<td>1000</td>
</tr>
</tbody>
</table>

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

Patent Applications Submitted

Year: 2009
Plan: 1150
Actual: 0

Patents listed

3. Publications (Standard General Output Measure)

Number of Peer Reviewed Publications

<table>
<thead>
<tr>
<th>2009</th>
<th>Extension</th>
<th>Research</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Plan</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Actual</td>
<td>0</td>
<td>1</td>
<td>0</td>
</tr>
</tbody>
</table>

V(F). State Defined Outputs

Output Target

Output #1

Output Measure
- Number of educational programs delivered to youth. Target is number of programs.

<table>
<thead>
<tr>
<th>Year</th>
<th>Target</th>
<th>Actual</th>
</tr>
</thead>
<tbody>
<tr>
<td>2009</td>
<td>{No Data Entered}</td>
<td>59</td>
</tr>
</tbody>
</table>

Output #2

Output Measure
- Number of youth participating in educational program targeting childhood obesity. Target is number of youth participating.

<table>
<thead>
<tr>
<th>Year</th>
<th>Target</th>
<th>Actual</th>
</tr>
</thead>
<tbody>
<tr>
<td>2009</td>
<td>{No Data Entered}</td>
<td>4449</td>
</tr>
</tbody>
</table>

Output #3

Output Measure
- Number of teachers or other youth serving professionals trained in childhood obesity issues. Target is number of professionals trained.

Not reporting on this Output for this Annual Report

Output #4

Output Measure
- Number of partnerships formed in local counties of youth professionals to collaborate on childhood obesity issues. Target is number of partnerships formalized.
Output #5

Output Measure

- Research: Awareness created; change in knowledge through publications and integration into extension programs. Target is number of research projects.

Not reporting on this Output for this Annual Report
## V(G). State Defined Outcomes

<table>
<thead>
<tr>
<th>O. No.</th>
<th>OUTCOME NAME</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Improved knowledge of food guide pyramid, serving sizes, and physical activity. Targets are the number of participants reporting outcome.</td>
</tr>
<tr>
<td>2</td>
<td>Increased knowledge of healthy food choices including five servings of fruits and vegetables each day. Target is number of youth reporting outcome.</td>
</tr>
<tr>
<td>3</td>
<td>Improved eating behavior practices, food choices, and lifestyle habits. Targets are the number of participants reporting outcome.</td>
</tr>
<tr>
<td>4</td>
<td>Individuals gain awareness, knowledge and skills related to: improved attitude about healthy eating; increased knowledge of healthy food choices; improved skills in selection of healthy foods; improved body image. Target is number of participants reporting outcome</td>
</tr>
<tr>
<td>5</td>
<td>Youth incorporate skills and change behaviors related to: increased physical activity; increased knowledge of healthy food choices; improved selection of healthy foods; understanding of serving sizes; improved body image.</td>
</tr>
<tr>
<td>6</td>
<td>Youth and families experience: improved nutritional health; reduced medical costs; health improved through community opportunities; healthier weight; decreased risk factors for nutrition-health related problems. Target is number of participants reporting outcome.</td>
</tr>
<tr>
<td>7</td>
<td>Short term outcome of research efforts include increased grant funding, publications, and increased involvement on regional and multi-state projects. Target is number of projects.</td>
</tr>
</tbody>
</table>
Outcome #1

1. Outcome Measures

   Improved knowledge of food guide pyramid, serving sizes, and physical activity. Targets are the number of participants reporting outcome.

2. Associated Institution Types

   ● 1862 Extension

3a. Outcome Type:

   Change in Knowledge Outcome Measure

3b. Quantitative Outcome

<table>
<thead>
<tr>
<th>Year</th>
<th>Quantitative Target</th>
<th>Actual</th>
</tr>
</thead>
<tbody>
<tr>
<td>2009</td>
<td>{No Data Entered}</td>
<td>2114</td>
</tr>
</tbody>
</table>

3c. Qualitative Outcome or Impact Statement

   Issue (Who cares and Why)
   Childhood obesity has more than tripled in the past 30 years. The prevalence of obesity among children aged 6 to 11 years increased from 6.5% in 1980 to 19.6% in 2008. The prevalence of obesity among adolescents aged 12 to 19 years increased from 5.0% to 18.1%. Approximately 13,000 of 57,000 Wyoming children ages 10 to 17 years (22.9%) are considered overweight or obese according to BMI for age standards. Wyoming ranks third among the 50 states and D.C. in overall prevalence.
   * Only one in six (16.3%) Wyoming children in higher income families are overweight or obese. The state ranks third in prevalence among higher income children.
   * One in five (20.2%) Wyoming children with private health insurance are overweight or obese.
   * Wyoming children are more likely than their counterparts nationwide to be physically active for at least 4 days per week, and less likely to spend 2 hours or more in front of a television or computer screen.

   What has been done
   UW CES utilized EFNEP youth curricula taught in a series of lessons and day camps; displays and demonstrations; Other nutrition efforts focused on educational programs which increase knowledge and skills in nutrition needs of children and incorporate physical activity into lifestyle; educators use media outreach (newspapers, newsletters, radio); health fairs; Programs which teach body size acceptance also are targeted to youth.

   Results
   Results of the 65 educational programs (several were series of 5 - 8 weeks) reaching 2114 youth included:
   27% reported eating a variety of foods;
   Over 50% increased their knowledge of MyPryamid food groups;
   24% could identify missing food groups in meals;
   45% could identify physical activity recommendations for their age;
   33% increased their knowledge of body size diversity.

4. Associated Knowledge Areas

<table>
<thead>
<tr>
<th>KA Code</th>
<th>Knowledge Area</th>
</tr>
</thead>
<tbody>
<tr>
<td>703</td>
<td>Nutrition Education and Behavior</td>
</tr>
</tbody>
</table>
Outcome #2

1. Outcome Measures
   Increased knowledge of healthy food choices including five servings of fruits and vegetables each day. Target is number of youth reporting outcome.

2. Associated Institution Types
   - 1862 Extension

3a. Outcome Type:
   Change in Knowledge Outcome Measure

3b. Quantitative Outcome
<table>
<thead>
<tr>
<th>Year</th>
<th>Quantitative Target</th>
<th>Actual</th>
</tr>
</thead>
<tbody>
<tr>
<td>2009</td>
<td>{No Data Entered}</td>
<td>942</td>
</tr>
</tbody>
</table>

3c. Qualitative Outcome or Impact Statement

   Issue (Who cares and Why)
   Approximately 13,000 of 57,000 Wyoming children ages 10 to 17 years (22.9%) are considered overweight or obese according to BMI for age standards. Wyoming ranks third among the 50 states and D.C. in overall prevalence.
   * Only one in six (16.3%) Wyoming children in higher income families are overweight or obese. The state ranks third in prevalence among higher income children.
   * One in five (20.2%) Wyoming children with private health insurance are overweight or obese.
   * Wyoming children are more likely than their counterparts nationwide to be physically active for at least 4 days per week, and less likely to spend 2 hours or more in front of a television or computer screen.

   What has been done
   EFNEP curriculum including Grazin' with Marty Moose, WIN Kids, and Eating Your Way through Wyoming History in addition to MyPyramid, and MyPryamid II were taught reaching 942 youth. Additionally adult classes focus on the importance of increasing fruit and vegetable servings for good nutrition.

   Results
   Over half of the youth participants increased their knowledge of MyPyramid food groups. Over 90 percent of participants tried at least one new fruit or vegetable. Over half of participants reported they planned to eat more fruits and vegetables every day.

4. Associated Knowledge Areas

<table>
<thead>
<tr>
<th>KA Code</th>
<th>Knowledge Area</th>
</tr>
</thead>
<tbody>
<tr>
<td>703</td>
<td>Nutrition Education and Behavior</td>
</tr>
</tbody>
</table>

Outcome #3

1. Outcome Measures
   Improved eating behavior practices, food choices, and lifestyle habits. Targets are the number of participants reporting outcome.

2. Associated Institution Types
3a. Outcome Type:
Change in Action Outcome Measure

3b. Quantitative Outcome

<table>
<thead>
<tr>
<th>Year</th>
<th>Quantitative Target</th>
<th>Actual</th>
</tr>
</thead>
<tbody>
<tr>
<td>2009</td>
<td>{No Data Entered}</td>
<td>153</td>
</tr>
</tbody>
</table>

3c. Qualitative Outcome or Impact Statement

**Issue (Who cares and Why)**
Approximately 13,000 of 57,000 Wyoming children ages 10 to 17 years (22.9%) are considered overweight or obese according to BMI for age standards. Wyoming ranks third among the 50 states and D.C. in overall prevalence.
* Only one in six (16.3%) Wyoming children in higher income families are overweight or obese. The state ranks third in prevalence among higher income children.
* One in five (20.2%) Wyoming children with private health insurance are overweight or obese.
* Wyoming children are more likely than their counterparts nationwide to be physically active for at least 4 days per week, and less likely to spend 2 hours or more in front of a television or computer screen.

**What has been done**
Nutrition educators presented programs on Steps to a New You and nutrition for high school wrestlers. Programs emphasized importance of physical exercise in addition to proper nutrition for health and performance (in regard to wrestlers).

**Results**
100 percent of participants in educational programs reported gaining knowledge on the topic. A New you: Health for Every Body/Healthy Weight participants took a pre- & post- workshop questionnaire. Pre-test average=64%; Post-test average=90% documenting knowledge gained.

4. Associated Knowledge Areas

<table>
<thead>
<tr>
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<th>Knowledge Area</th>
</tr>
</thead>
<tbody>
<tr>
<td>703</td>
<td>Nutrition Education and Behavior</td>
</tr>
</tbody>
</table>

**Outcome #4**

1. Outcome Measures
Individuals gain awareness, knowledge and skills related to: improved attitude about healthy eating; increased knowledge of healthy food choices; improved skills in selection of healthy foods; improved body image. Target is number of participants reporting outcome

2. Associated Institution Types
- 1862 Extension

3a. Outcome Type:
Change in Knowledge Outcome Measure

3b. Quantitative Outcome

<table>
<thead>
<tr>
<th>Year</th>
<th>Quantitative Target</th>
<th>Actual</th>
</tr>
</thead>
<tbody>
<tr>
<td>2009</td>
<td>{No Data Entered}</td>
<td>2114</td>
</tr>
</tbody>
</table>
3c. Qualitative Outcome or Impact Statement

Issue (Who cares and Why)
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* Only one in six (16.3%) Wyoming children in higher income families are overweight or obese. The state ranks third in prevalence among higher income children.
* One in five (20.2%) Wyoming children with private health insurance are overweight or obese.
* Wyoming children are more likely than their counterparts nationwide to be physically active for at least 4 days per week, and less likely to spend 2 hours or more in front of a television or computer screen.

What has been done
UW CES utilized EFNEP youth curricula taught in a series of lessons and day camps; displays and demonstrations; Other nutrition efforts focused on educational programs which increase knowledge and skills in nutrition needs of children and incorporate physical activity into lifestyle; educators use media outreach (newspapers, newsletters, radio); health fairs; Programs which teach body size acceptance also are targeted to youth.

Results
Results of the 65 educational programs (several were series of 5 - 8 weeks) reaching 2114 youth included:

- 27% reported eating a variety of foods;
- Over 50% increased their knowledge of MyPyramid food groups;
- 24% could identify missing food groups in meals;
- 45% could identify physical activity recommendations for their age;
- 33% increased their knowledge of body size diversity.

4. Associated Knowledge Areas

<table>
<thead>
<tr>
<th>KA Code</th>
<th>Knowledge Area</th>
</tr>
</thead>
<tbody>
<tr>
<td>703</td>
<td>Nutrition Education and Behavior</td>
</tr>
</tbody>
</table>

Outcome #5

1. Outcome Measures
Youth incorporate skills and change behaviors related to: increased physical activity; increased knowledge of healthy food choices; improved selection of healthy foods; understanding of serving sizes; improved body image.

2. Associated Institution Types
- 1862 Extension

3a. Outcome Type:
Change in Action Outcome Measure

3b. Quantitative Outcome

<table>
<thead>
<tr>
<th>Year</th>
<th>Quantitative Target</th>
<th>Actual</th>
</tr>
</thead>
<tbody>
<tr>
<td>2009</td>
<td>{No Data Entered}</td>
<td>2114</td>
</tr>
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3c. Qualitative Outcome or Impact Statement

Issue (Who cares and Why)
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19 years increased from 5.0% to 18.1%. Approximately 13,000 of 57,000 Wyoming children ages 10 to 17 years (22.9%) are considered overweight or obese according to BMI for age standards. Wyoming ranks third among the 50 states and D.C. in overall prevalence. 
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What has been done 
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4. Associated Knowledge Areas

<table>
<thead>
<tr>
<th>KA Code</th>
<th>Knowledge Area</th>
</tr>
</thead>
<tbody>
<tr>
<td>703</td>
<td>Nutrition Education and Behavior</td>
</tr>
</tbody>
</table>

Outcome #6

1. Outcome Measures

Youth and families experience: improved nutritional health; reduced medical costs; health improved through community opportunities; healthier weight; decreased risk factors for nutrition-health related problems. Target is number of participants reporting outcome.

Not Reporting on this Outcome Measure

Outcome #7

1. Outcome Measures

Short term outcome of research efforts include increased grant funding, publications, and increased involvement on regional and multi-state projects. Target is number of projects.

Not Reporting on this Outcome Measure

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

Brief Explanation

Many conditions and situations that exist in Wyoming are similar to those in other parts of the country, for example, the following: • Food choices made available and advertised to consumers by producers; •
Access to timely and accurate information; • Coordination and cooperation of federal agencies and state partners, schools and other youth agencies.; • Existence of local collaboration; • Level of funding at federal, state and local level; and • Willingness of community organizations, to collaborate with Wyoming Cooperative Extension Service.

This is a new planned program. Outcomes are limited.

V(I). Planned Program (Evaluation Studies and Data Collection)

1. Evaluation Studies Planned

Evaluation Results

(No Data Entered)

Key Items of Evaluation

(No Data Entered)