V(A). Planned Program (Summary)

Program # 9

1. Name of the Planned Program

Childhood Obesity - Family Nutrition

☑ Reporting on this Program

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>0%</td>
<td>0%</td>
<td>0%</td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>100%</td>
<td>0%</td>
<td>0%</td>
<td>0%</td>
</tr>
</tbody>
</table>

V(C). Planned Program (Inputs)

1. Actual amount of FTE/SYs expended this Program

| Year: 2012 | Extension | | Research | | |
|------------|-----------|-----------------|-----------|-----------|
|            | 1862      | 1890            | 1862      | 1890      |
| Plan       | 0.0       | 7.0             | 0.0       | 0.0       |
| Actual Paid Professional | 0.0       | 7.0             | 0.0       | 0.0       |
| Actual Volunteer | 0.0       | 114.0           | 0.0       | 0.0       |

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>Smith-Lever 3b &amp; 3c</td>
<td>1890 Extension</td>
</tr>
<tr>
<td>0</td>
<td>496794</td>
</tr>
<tr>
<td>1862 Matching</td>
<td>1890 Matching</td>
</tr>
<tr>
<td>0</td>
<td>234087</td>
</tr>
<tr>
<td>1862 All Other</td>
<td>1890 All Other</td>
</tr>
<tr>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

V(D). Planned Program (Activity)

1. Brief description of the Activity

Provided one-on-one consultations
Conducted on-site food demonstrations
Provided train-the-trainer opportunities
Conducted educational programs and classes
Taught a series of nutrition classes to special interest groups
Exhibit educational displays at various sites

2. Brief description of the target audience

Minority families and individuals
Senior adults
Single parents
Persons coping with and at risk for chronic illnesses

3. How was eXtension used?

Fact sheets from eXtension site were used in the program delivery.

V(E). Planned Program (Outputs)

1. Standard output measures

<table>
<thead>
<tr>
<th>Year</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>Actual</td>
<td>5663</td>
<td>7500</td>
<td>7565</td>
<td>6000</td>
</tr>
</tbody>
</table>

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

Patent Applications Submitted

Year: 2012
Actual: 0

Patents listed

3. Publications (Standard General Output Measure)

Number of Peer Reviewed Publications

<table>
<thead>
<tr>
<th>Year</th>
<th>Extension</th>
<th>Research</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Actual</td>
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<td>0</td>
<td>5</td>
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</tbody>
</table>

V(F). State Defined Outputs

Output Target

Output #1

Output Measure

- Conduct educational programs on basic nutrition, enroll participants in a series of nutrition educational classes, conduct nutrition workshops and seminars on new dietary guidelines and MyPyramid, disseminate information letters addressing nutrition and health, and conduct on site
food demonstrations for adults and youth.

<table>
<thead>
<tr>
<th>Year</th>
<th>Actual</th>
</tr>
</thead>
<tbody>
<tr>
<td>2012</td>
<td>400</td>
</tr>
</tbody>
</table>
## V(G). State Defined Outcomes

### V. State Defined Outcomes Table of Content

<table>
<thead>
<tr>
<th>O. No.</th>
<th>OUTCOME NAME</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Participants understand and use MyPyramid in meal buying and preparation. Participants become aware of diet related diseases. Participants understand the connection between diet and exercise. Participants increase consumption of fruits and vegetables. Expectant teen mothers adopt healthy eating habits. Participants modify recipes to decrease amount of calories.</td>
</tr>
</tbody>
</table>
Outcome #1

1. Outcome Measures

Participants understand and use MyPyramid in meal buying and preparation. Participants become aware of diet related diseases. Participants understand the connection between diet and exercise. Participants increase consumption of fruits and vegetables. Expectant teen mothers adopt healthy eating habits. Participants modify recipes to decrease amount of calories.

2. Associated Institution Types

- 1890 Extension

3a. Outcome Type:

Change in Action Outcome Measure

3b. Quantitative Outcome

<table>
<thead>
<tr>
<th>Year</th>
<th>Actual</th>
</tr>
</thead>
<tbody>
<tr>
<td>2012</td>
<td>957</td>
</tr>
</tbody>
</table>

3c. Qualitative Outcome or Impact Statement

Issue (Who cares and Why)
The prevalence of obesity in more than 60% of the adult population has tripled in children and adolescents. Approximately 35% of children from low-income families are overweight/obese. The impact of overweight children are seen in risk factors for cardiovascular disease, high cholesterol or high blood pressure, bone and joint problems, sleep apnea, and social and psychological problems. Among children and adolescents, 15% are overweight and more than 70% have diseases associated with obesity such as hypertension and elevated cholesterol levels. In Texas, obesity related diseases including diabetes, hypertension, cancer and heart disease are found in higher rates among various members of racial-ethnic minorities (e.g. African American and Hispanic Americans). The prevalence of obesity among children and adults has epidemic consequences.

What has been done
Let’s Get Physical 5K Run and Health Fair was conducted. Step Up and Scale Down, a 12 lesson weight management series that teaches adults the basis of meal planning, goal setting, staying motivated in weight loss, physical activity, and hydration, were conducted. Fuel Up to Play 60, a program that empowers students to take charge of making small, everyday changes choosing good-for-you foods and getting active for at least 60 minutes per day were conducted. Students have walked 204 miles and staff members stated that youth are choosing and eating more fruits and vegetables and they are engaging in physical activity. A three week health challenge was implemented for men to celebrate mens health month targeting males 18 and up. Program goals were weight management, increased consumption of fruits and vegetables, increase physical activity and increase meal planning with the MyPlate program.

Results
Within the Step Up and Scale Down program, participants’ loss weight and increased their exercise regimen between two to six days per week. Participants stated that they are consuming more fruits and vegetables, reduced calories based upon height and weight and one participant stated that this program is helping with his renal failure.

Students participating in the Fuel Up to Play 60 walked a combined total of 204 miles and staff members at a local school stated that the youth are choosing and eating more fruits and vegetables. They also engage in physical activity after eating lunch.

4. Associated Knowledge Areas

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

V(H). Planned Program (External Factors)

External factors which affected outcomes
- Natural Disasters (drought, weather extremes, etc.)
- Economy
- Competing Programmatic Challenges
- Populations changes (immigration, new cultural groupings, etc.)
- Other (CEP staff changes)

Brief Explanation

Some individuals’ class participants were unable for various reasons to complete all sessions.
- Lack of available transportation
- Personnel changes and community sites
- Lack of family support for individuals enrolled in class series

V(I). Planned Program (Evaluation Studies)

Evaluation Results

- Individuals change food portion consumption.
- More individuals read food labels.
- Increase in home gardens.
- Regular monitoring of blood glucose levels.
- Increase in physical fitness activities, such as walking and dancing.
- Increase consumption of fruits and vegetables.
- Weight loss which led to decrease in prescribed medications.

Key Items of Evaluation

- Increase knowledge and adoption of nutrition education
- Diabetes and obesity management
- Family meal time and food preparation
- Health