



IMPACT 2018

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Childhood Obesity Prevention

Through Family and Consumer Sciences (FCS) Extension Programs across the nation, FCS Educators provide numerous educational opportunities to meet the needs of diverse audiences. Childhood obesity affects 1 in 6 children and adolescents in the United States. Extension programs reduce childhood obesity through improved diet and physical activity along with interactive, hands-on, behaviorally-focused education. Developing healthy habits early in childhood and continuing those habits through adolescence help youth become healthy adults.

Eating Healthy Begins Early

Utah promoted healthy lifestyles for children by offering 1,395 *Childhood Obesity Prevention* sessions to 36,497 participants in 2017. *Healthy Child Care* **Georgia** provided 30 nutrition education lessons to 286 pre-kindergarten children and helped teachers improve wellness practices. Teachers gained confidence in teaching nutrition, and children correctly identified more fruits and vegetables after the intervention.

“As a mom, we have the power. We decide what to bring to our tables. I now pay more attention to nutrition labels, prices and incorporate more vegetables and fruits.” – California participant

School-based Programs

In 2017, school foodservice staff were trained in many states with new strategies for marketing breakfast in schools. In **Minnesota**, *Wake Up to School Breakfast* was taught 13 times to 192 youth. *Healthy Communities at Shady Grove Elementary School* in **Louisiana** promoted wellness and policy changes with 179 participants.

Body Quest: Food of the Warrior was taught 338 times to 5,119 youth in **Alabama** schools through a 15-week curriculum with engaging characters, iPad games and

lessons. Students increased their vegetable consumption.

Smarter Lunchrooms- Making the Healthy Choice the Easy Choice for **Idaho** students was taught in 5 school districts 16 times to empower school personnel to make small, low-cost changes in their lunchrooms to help students make more nutritious food choices. *On the Move Junior* was offered as a 5-lesson series from **North Dakota** Extension, aiming to improve fruit and vegetable consumption among 2,183 2nd graders. Parents received newsletters and participated in goal setting. About 85% of children ate more fruit, 75% ate more vegetables and 80% tried new foods.

North Carolina Extension offered 780 sessions of the 9-lesson *Steps to Health School-Based Project* to reach 18,377 participants. Students in school settings improved eating and physical activity behaviors; 69% of students reported liking a vegetable they previously disliked or never tried. In **West Virginia**, *Rethink Your Drink* was taught 310 times to 59,000 participants and included classes and media outreach to reduce sugar-sweetened beverage intake and increase water to improve health and reduce obesity.

California's *UC CalFresh* 10 lessons were taught 3 times to 300 participants at 4 locations. *UC CalFresh* staff trained 30 high school students to deliver *CATCH (Coordinated Approach to Child Health)* curricula to 300 1st grade students. High school students were positive role models, built skills, and increased physical activity. Food service directors in **Oregon** were purchasing very little produce directly from local farms due to a variety of barriers. SNAP-Ed staff worked to address these barriers, resulting in almost 40,000 pounds of farm-direct produce served to 7,000 students with the help of 6 partners in 2017. **Kentucky** delivered *Youth Fruit and Vegetable*

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Access to 46 counties and reached 13,584 children to increase fruit/vegetable access through direct education and system/policy change. Among participants, 8,245 children in grades 3 to 5 reported intention to ask their family to buy their favorite fruit or vegetables.

“As a working mom, it is a challenge to get real food on the table and I struggle with meal planning. It was nice to get some simple tools that helped me to think more about how we are eating as a family.” – Kentucky participant

Hands-on Cooking



Oklahoma’s Teen Cuisine was taught 6 times to 174 youth; most youth had never used a paring knife or read a recipe. About 53% of participants planned to cook many of the foods they eat each day. **Kentucky** offered 44 **Super Star Chef** 4-lesson sessions to 643 students. These statewide summer day camps taught hands-on nutrition, healthy eating and basic cooking skills. About 96% planned

to eat more fruits and vegetables.

Federal Programs

In 2017, 85% of Los Angeles County, **California** **EFNEP** families were at or below 100% of the poverty level. Participating families saved an average of \$53 a month on groceries while they improved the amount of healthful foods their families consumed. In **Delaware**, **EFNEP**, **SNAP-ED** and **4-H** reached 4,208 youth, ages 8-12, at 63 locations statewide, offering 6 hours of nutrition and fitness training with 1,500 limited resource youth. About 85% of 4,208 participants gained new skills, 91% increased knowledge of healthful diet practices, and 97% increased their physical activity levels.

Ohio’s SNAP-Ed Youth and Teen offered 21,192 class sessions statewide to 338,629 participants. About 84% of

teens and 75% of youth reported eating vegetables daily. The **Ohio EFNEP Youth Program** offered 431 sessions to 8,794 youth; 83% of youth improved their nutrition knowledge/practices and 87% of youth participants graduated from the program.

Kentucky’s EFNEP Youth Program was offered in 28 counties to 9,951 youth. Nearly 1 out of 2 Kentucky children consume less than 1 fruit daily. **Kentucky EFNEP** helped improve the health of 2,532 families reaching a total of 10,073 family members. More than 9,951 youth were enrolled in nutrition education, with 80% of **EFNEP** youth improving their ability to choose healthful foods.

To prevent childhood obesity, 4,388 **Alabama** children in kindergarten and grades 4 to 8 completed **CATCH** curricula lessons. These **EFNEP** graduates learned to make wise nutrition choices and increase physical activity.

At my daughter’s doctor visit, the pediatrician asked me what I was doing differently, because of the changes she saw in my daughter’s weight and behavior. She is more active. During previous doctor visits she used to sit in the office and would be out of breath due to her obesity. I told the doctor that I was attending these classes and they were helping my whole family. – Oregon EFNEP participant

This report was compiled by Karen Ensle, Ed.D., RDN, Rutgers Extension, Public Affairs Education Subcommittee member, and Julie Garden-Robinson, Ph.D., RD, North Dakota State University Extension Service, Vice President for Public Affairs. For more information, email Julie.Garden-Robinson@ndsu.edu

Raising kids. Eating right. Spending smart 

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