



# IMPACT 2021

Through Extension programs across the nation, Family and Consumer Sciences Extension Educators provide a multitude of Educational opportunities to meet the needs of diverse audiences.

## Diabetes Prevention and Management

The CDC reports that “eighty-four million Americans now have prediabetes. If lifestyle changes are not made, these individuals will develop type 2 diabetes within 5 years.” Cooperative Extension impacts the lives of participants and their families by addressing the serious effects of diabetes, such as shorter life expectancy, higher healthcare costs and increased risk for developing chronic disease, through programs that promote healthy behaviors, diabetes management, and improved health outcomes.

“I found the class to be very helpful. In fact, with a good diet and considerable exercise I can report a weight loss of 17 pounds to date. Information really is power.” **Kansas** Dining with Diabetes Online participant

81% indicated they felt positively about the progress made towards their health goals, and 81% indicated they learned new information about diabetes. **K-State** created and piloted *Dining with Diabetes Online* during 2020 with 16 citizens. The class has educational videos, participant handbooks, food demonstrations, diabetes friendly recipes, physical activity videos, discussion questions and quizzes.

“Prior to learning about the “Dining with Diabetes” class, I had been praying and asking for help with lowering my A1c... Shortly after starting the class, my A1c was 8.2. By the follow-up class, my A1c was 5.7. I felt much better! I also loss approximately 15 lbs.” - **Florida** Dining with Diabetes participant

### Online Programming

Extension has developed many online programs in response to the coronavirus pandemic. The National Dining with Diabetes working group developed guidelines for conducting *Dining with Diabetes* online, as well as *Dining with Diabetes E-mail Challenges* which took place in May and in November. The first challenge was a pilot and was conducted in 4 states with 228 participants. The second had 380 participants representing 26 states and 2 countries. Participants were sent two e-mails a week for four weeks. The e-mails used videos, cooking demonstration videos, discussion boards, social media (Facebook) to promote and teach diabetes management skills. In the November series,

### Dining with Diabetes

Although the pandemic slowed down traditional in person programming, several states still implemented the 4-session, *National Dining with Diabetes* program, covering complications, diagnostic tests, and nutrients. 153 participants from **Ohio, Idaho, Mississippi, Kansas, and Indiana** participated in a national evaluation: 72% increased their knowledge of diabetes, 81% of participants were cooking more at home, 89% were eating smaller portions, and 76% were using recipes provided by the program. 52% indicated that they were fitting physical activity into their daily routine since starting the class.

Raising kids. Eating right. Spending smart



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*"For the first time in my life, I'm not dreading the lab work at my annual physical.... I am motivated to keep practicing these new skills and continue to improve my health. ... You helped me change my life." -North Dakota Diabetes Prevention Program Participant*

*"My blood pressure is now normal... I lost 5% of my beginning weight in the first twelve weeks of the program and am close to my weight loss goal!" - Oklahoma Do Well, Be Well with Diabetes*

**Texas** implemented several diabetes education programs including *Cooking Well with Diabetes, Do Well, Be Well with Diabetes, Wisdom, Power, Control, Diabetes and Si, Yo Puerdo Controlar Mi Diabetes*. These programs collectively reached 48,834 individuals with diabetes and focused on diabetes prevention and management. Target audiences include adults, African American and Hispanic with diabetes or pre-diabetes. These contacts resulted in potential lifetime health care cost savings and increased productivity of \$16.7 million.

## National Diabetes Prevention Program

The *National Diabetes Prevention Program (DPP)* is recognized by the Centers for Disease Control and Prevention as an evidence-based program for helping at-risk individuals to prevent or delay diabetes. A 5-7% weight loss has been shown to reduce risk of chronic diseases. Extension educators in several states offered *DPP* in 2020. One hundred sixty-eight **Georgia** participants lost 1401 pounds collectively! In **Michigan**, 46 people participated and lost on average 8.6 percent of their initial weight. One **Florida** county reported that 29 *DPP* participants collectively lost 99 lbs. **North Dakota** participants reached the target weight reduction by losing 6.1 percent. They also achieved the goal of increasing their physical activity to over 157 minutes per week. **Alaska** reported that 458 people participated and made significant lifestyle changes. In another **Arizona** county, 134 people participated and reported a total weight loss of 1,064 pounds and increased their physical activity time to a weekly average of 267 minutes following the class.

*"Just had to share. This is the first morning in a long time that my blood sugars have been in range – 104. I have accepted the challenge and am tracking food consumption and being honest with myself and walking every day." Dining with Diabetes E-mail participant*



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**National Extension Association of Family and Consumer Sciences (NEAFCS)** provides professional development for Extension professionals who improve the quality of life for individuals, families, and communities and provide education in the areas of: Childhood Obesity Prevention; Community Health and Wellness; Diabetes Prevention and Management; Financial Management; Food and Nutrition; Food Safety; Healthy Homes and the Environment; Improving Children's Lives; and Protecting our Resources – Family Life. NEAFCS is an equal opportunity/affirmative action association. NEAFCS values and seeks a diverse membership. There shall be no barriers to full participation in this organization on the basis of race, color, gender, age, religion, national origin, disability, veteran status, or sexual orientation. Membership is not by invitation. (Strategic Plan 1993-97)