

EFNEP

Expanded Food and Nutrition Education Program

Cooperative State Research, Education, and Extension Service



FY 2001 Program Impacts



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The Expanded Food and Nutrition Education Program (EFNEP) is a unique program that currently operates in nearly 800 counties throughout the 50 states and in the territories of American Samoa, Guam, Micronesia, Northern Marianas, Puerto Rico, and the Virgin Islands. It is designed to assist low-income audiences in acquiring the knowledge, skills, attitudes, and changed behavior necessary for nutritionally sound diets, and to contribute to their personal development and the improvement of the total family diet and nutritional well-being.

EFNEP targets two primary audiences: low-income youth and low-income families with young children. In Fiscal Year 2001, EFNEP reached 447,027 youth and 164,154 adults; approximately 600,930 family members (1,651 more than FY'00) were indirectly reached through the adult participant.

Who Are EFNEP Families?

- 74% of EFNEP families receive Federal food assistance at entry; EFNEP helps 8% more receive this assistance at exit.
- 33% of the enrolled families have income at or below 50% of the poverty level.
- As shown in figure 1, 68% of the families are from minority groups (3% more than FY'00).

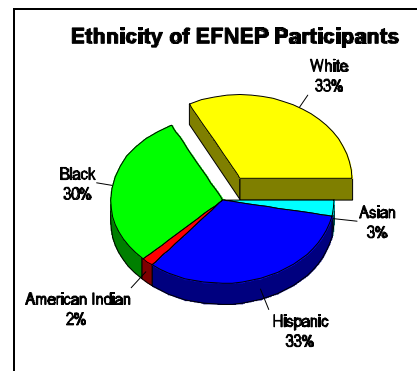


Figure 1

How Is EFNEP Taught?

EFNEP is delivered as a series of lessons, often over several months, by paraprofessionals and volunteers, many of whom are indigenous to the target population. The hands-on, learn-by-doing approach allows the participants to gain the practical skills necessary to make positive behavior changes. In 2001, 2,448 paraprofessionals along with 37,419 volunteers delivered an average of 9 lessons to EFNEP adult participants, and a range of 6 - 15 or more lessons to youth. With over 1,440 FTEs devoted to the EFNEP program, 72% of that time was spent on the adult participant. For the majority of the adult participants (76%), delivery was by way of a group environment, 18% one-to-one instruction, 5% a combination of the two instructions, and 1% were taught through a different type of instruction (i.e. telephone, mailings, etc.) Sixty-six percent (66%) of adult participants completed the program, and 19% are continuing the program in the year 2002. Through EFNEP, participants learn self-worth — that they have something to offer their families and society.

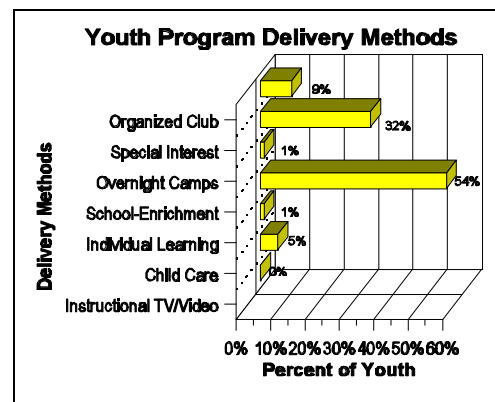


Figure 2

The delivery of EFNEP youth programs takes on various forms. EFNEP provides education at schools as an enrichment of the curriculum, in after-school care programs, through 4-H EFNEP clubs, day camps, residential camps, community centers, neighborhood groups, and home gardening workshops. See Figure 2 for a breakdown of youth delivery methods. In addition to lessons on nutrition, food preparation and food safety, youth topics may also include fitness, avoidance of substance abuse, and other health-related topics.

How Are Accomplishments Measured?

Adult Component

Data from the EFNEP Evaluation/Reporting System is used to measure food practices and dietary improvements. Ten key food-related practices were measured at entry into EFNEP and upon graduation. These behavior changes translate into significant improvements in daily living skills. Results based on data from 106,062 graduates show that:

- 83% improved in one or more food resource management practices (i.e., plans meals, compares prices, does not run out of food or uses grocery lists);
- 87% improved in one or more nutrition practices (i.e., makes healthy food choices, prepares foods without adding salt, plans meals, reads nutrition labels or has children eat breakfast); and
- 67% improved in one or more of the food safety practices (i.e. thawing and storing foods properly).

As figure 3 indicates, when participants first enrolled in the program, only 4% followed the acceptable practices for all ten indicators. At the end of the program, 25% had achieved this goal. These practices were measured based on entry and exit assessment of four indicators of Food Resource Management (FRM), five indicators of Nutrition Practices (NP), and two indicators of Food Safety (FS).

In addition to the ten key food-related practices that focused on food resource management, nutrition practices, and food safety, states also have the option of selecting from 130 additional questions that measure behavior in the following areas: attitude/barriers; cooking attitude; food preparation; healthy lifestyle; knowledge; locus of control; money management; nutrition attitude; parenting; personal development; physical fitness; pregnancy; personal relationship; stages of change; food security; and other needs.

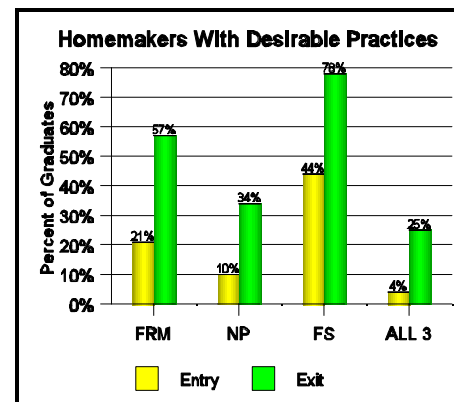


Figure 3

Some of the results from these questions include:

Nutrition Practices

- 65% (86 of 133 participants) now read food labels for fat content;
- 63% (89 of 141 participants) now often serve more than one kind of vegetable to their family each day;
- 65% (280 of 433 participants) now eat 3 or more servings of vegetables each day;
- 45% (303 of 670 participants) now eat 2 or more servings of fruit each day;
- 57% (77 of 135 participants) now often serve more than one kind of fruit to their family each day;
- 56% (585 of 1054 participants) now consume 2 - 3 servings of milk, yogurt, and cheese each day;
- 62% (179 of 287 participants) now often eat low-fat foods instead of high-fat foods.

Food Safety

- 45% (59 of 130 pregnant women) are preventing listeria by heating hot dogs, lunch meats, cold cuts and deli meats until steaming hot.

Physical Fitness

- 42% (286 of 675) participants) now exercise for a total of 30 minutes each day.

Money Management

- 50% (3,860 of 7,721 participants) now use a written spending plan or budget;
- 50% (175 of 347 participants) now keep track of some or all of their expenses;
- 42% (260 of 622 participants) now often set aside money for occasional bills;
- 56% (74 of 133 participants) now feel confident about managing their money to make healthy food available in their home.

The dietary intake of six key nutrients that are often limited in the diets of low-income audiences: protein, iron, calcium, Vitamin A, Vitamin C, and Vitamin B₆ are also measured. As figure 4 illustrates, as a result of participation in EFNEP, intake levels for each nutrient increased.

There were also substantial improvements in the intake of food to meet the recommendations of the Food Guide Pyramid. As figure 5 illustrates, mean number of servings for each of the five groups improved. Servings increased as follows: 0.9 servings in the Breads & Cereals, Fruit, and Vegetable groups; 0.5 servings in the Calcium/Dairy group; and 0.4 servings in the Meats & Alternatives group. At entry, only 20.2% of the 108,751 graduates measured, had a diet that provided even half the recommended number of servings of breads and cereals and at least one serving from each of the other food groups. At exit, 51.5% of the participants had achieved this minimal level of intake. Ninety-two percent (93%) showed positive change in at least one food group at exit.

Youth Component

Data from the EFNEP Evaluation/Reporting System is also used to measure food practices and dietary improvements for youth. Four key impact indicators were measured at entry into EFNEP and upon graduation. Results based on data from 337,585 youth from 15,138 youth groups show that:

- 74% (62,298) of 84,187 youth from 3,835 groups now eat a variety of foods;
- 77% (73,997) of 96,100 youth from 4,332 groups increased knowledge of the essentials of human nutrition;
- 67% (49,645) of 74,098 youth from 3,140 groups increased their ability to select low-cost, nutritious foods, and;
- 73% (60,736) youth from 3,831 groups improved practices in food preparation and safety.

EFNEP has also been successful in collaborating with other agencies/organizations to increase its impact on youth. Throughout the country EFNEP has collaborated with school systems, daycare centers, boys and girls clubs, and other youth-oriented organizations to make a difference in the lives of youth. As a result, youth develop self-esteem, learn new food-related skills, and learn to work cooperatively in groups.

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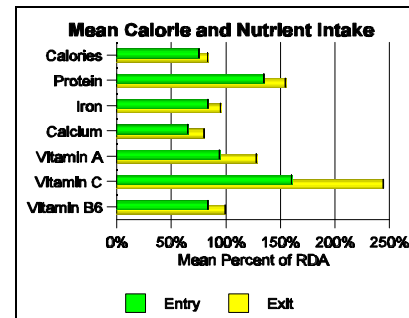


Figure 4

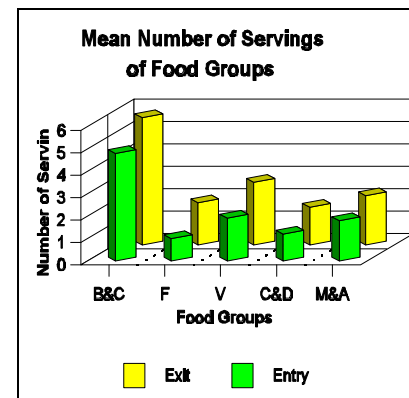


Figure 5