Fiscal Year 2005 Impact and Review of the Expanded Food And Nutrition Education Program

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New Federal Appropriations

Fiscal year 2006 marked an important point in the history of the Expanded Food and Nutrition Education Program (EFNEP). The appropriation of $62,634,000 is the largest amount ever received for EFNEP and for the first time the 1890 Land-grant Colleges and Universities are partners in this successful nutrition education program. This is a wonderful opportunity for the program to move forward in building a stronger, more inclusive program that helps limited resource families and youth improve the quality of their diets, handle food safely, stretch their food dollar and increase their physical activity, resulting in improved health and food security.

We welcome the 1890 Land-grant Colleges and Universities into the fold of this life-changing program and look forward to incorporating their accomplishments in the next fiscal year report.

Updated Reporting System

The Nutrition Education Evaluation and Reporting System, Version 5 (NEERS5) was designed as an expansion of the current Evaluation/Reporting System, version 4 (ERS4) which is used to evaluate the EFNEP program. NEERS5 is currently in its final testing stages and will soon be released to the 1862 and 1890 Land-grant colleges and universities. NEERS5 is a multi-level system that includes the county (CRS) and state (SRS) sub-systems, as well as two independent, but connecting systems (the youth and adult question development modules). One of the major changes that will be included in NEERS5 is the enhancement of the diet summary reports and feedback to clients. The MyPyramid Foods Database replaces the older database, expands the number of foods from the current 1,500 to over 7,000 foods and adds a wide choice of serving sizes. The reports will now reflect the MyPyramid logo, food groups and quantities consumed, and the new food guidance system, including the physical activity measure.
EFNEP operates in nearly 800 counties in all 50 states and in the six U.S. territories. EFNEP’s objective is to assist low-income families and youth by improving their diet quality and stretching their food dollar skills which help prevent obesity and improve their health.

In FY’05, EFNEP reached 411,849 youth and 150,995 adults. Figure 1 shows the racial breakdown of the EFNEP audience reached. An additional 556,784 family members were indirectly reached through the adult participants. The participants gained new skills in food preparation, shopping, storage, safety, and sanitation. They learned how to better manage their food budgets and related resources such as food stamps. Seventy-eight (78%) of EFNEP families were enrolled in one or more federal food assistance programs at the time they enrolled in EFNEP. Nine percent more received benefits from one or more federal-assistance programs due to assistance from EFNEP (Refer to Figure 2).

**Delivery**

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. A total of 2,134 paraprofessionals along with 33,628 volunteers delivered an average of 8.5 lessons to EFNEP adult participants and met with 15,233 youth groups for 216,723 hours of EFNEP instruction at 93,267 different group meetings. With over 960 full-time Equivalent (FTE) staff devoted to EFNEP, 72% of that time was spent with adult participants. EFNEP’s hands-on, learn-by-doing approach allows the participants to acquire the practical skills necessary to make positive changes in behavior.

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1 FY’05 data includes 739 adults; 3,396 youth; and 150 volunteers reported in New Orleans, LA. Impact data was lost due to hurricane Katrina.

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Figure 1—Adult Audience Reached

Figure 2—Families enrolled in other family-assistance programs at enrollment and due to EFNEP referral by exit in FY ‘05.
Adults

For the majority of the adult participants (81%), delivery was by way of a group environment, fourteen percent (14%) received one-on-one instruction, 5% a combination of the two methods, and 1% a different type of instruction (e.g., telephone, mailings, etc.). Sixty-three percent (63%) of adult participants completed the program, and 24% are continuing the program into the year 2006.

Youth

Youth delivery takes various delivery forms (refer to Figure 3) and includes topics such as fitness, avoidance of substance abuse, nutrition, food selection, and other health-related issues. EFNEP provides education at schools as an enrichment of the curriculum, in after-school care programs, and through 4-H EFNEP clubs, day camps, residential camps, community centers, neighborhood groups, and home gardening workshops.

![Youth Delivery Methods](image)

Data from the ERS4 are used to measure food practices and dietary improvements for youth. One or more of 4 key impact indicators were measured at entry into EFNEP and upon graduation. Results based on data from 407,955 youth from 15,204 groups show that:

- **73%** of 102,309 youth from 4,689 groups, now eat a greater variety of foods;
- **70%** of 130,723 youth from 5,531 groups, increased their knowledge of the essentials of human nutrition;
- **65%** of 97,785 youth from 4,333 groups, increased their ability to select low-cost nutritious foods;
- **65%** of 119,662 youth from 5,096 groups improved practices in food preparation and safety.
Data from the Evaluation/Reporting System (ERS4) are used to measure food practices and dietary improvements in EFNEP. Ten key food-related practices were measured at entry into EFNEP and upon graduation. These behavioral changes translate into significant improvements in daily living skills. Results based on data from 94,215 graduates show that:

84% 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);

89% Improved in one or more nutrition practices (i.e., plans meals, makes healthy food choices, prepares foods without adding salt, reads nutrition labels or has children eat breakfast);

67% Improved in one or more of the food safety practices (i.e. thawing and storing foods properly).

When participants first enrolled in the program, only 3% followed desirable practices for all 10 indicators. At the end of the program, 28% had achieved this goal (refer to Figure 4). 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 10 key food-related practices that focused on food resource management, nutrition practices, and food safety, states also have the option of selecting from 192 additional questions that measure behavior in 21 different areas. Some specific results from these questions include:

**Nutrition Practices**

75% (2,012 of 2,667 graduates) more often read food labels to select foods with less fat;

42% (2,178 of 5,169 graduates) no longer drink regular soda every day;

51% (4,930 of 9,707 graduates) now use either low-fat (2%) milk, very low-fat (1%) milk, or non-fat milk;

46% (2,784 of 6,059 graduates) now eat whole-wheat bread;

64% (2,722 of 4,222 graduates) more often make meals that include a variety of foods from the food guide pyramid;

46% (2,474 of 5,406 graduates) more often let their children choose how much they want to eat;

58% (763 of 1,321 graduates) now less often consume foods containing caffeine, such as coffee, tea, cocoa, soft drinks, or chocolate candy.
63% (2,811 of 4,451 graduates) now drink at least 6 cups of water a day;
45% (910 of 2,016 graduates) now consume 2–3 servings of milk, yogurt, and cheese each day;
61% (2,117 of 3,474 graduates) now eat low-fat foods instead of high-fat foods;
41% (2,114 of 5,164 graduates) now avoid ordering a ‘super-sized’ portion of food or beverage.

Physical Activity

45% (5,268 of 11,685 graduates) now more often participate in at least 30 minutes of moderate physical activity (sweeping, gardening, etc.) every day.

Resource Management

52% (3,927 of 7,588 graduates) now less often spend money on unplanned purchases;
57% (3,657 of 6,466 graduates) now more often use a written spending plan or budget;
46% (1,131 of 2,468 graduates) now more often keep track of some or all of their expenses.

As a result of improved resource management practices, the percent of families who “sometimes”, “most of the time” or “almost always” ran out of food by the end of the month decreased from 47% to 28%.

Dietary Intake

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 5 illustrates, intake levels for each nutrient increased as a result of participation in EFNEP.

Figure 5
Changes in diets to include more fruits and vegetables and dairy foods have been shown to lower the incidence of obesity and the risk of many chronic diseases. EFNEP has demonstrated remarkable success in increasing the consumption of these key foods. According to evaluation data, participants consumed 1.6 more servings of fruits and vegetables and .5 additional servings of dairy foods, after participating in EFNEP, compared to their intake levels when they started EFNEP (refer to Figure 6). Ninety-three percent (93%) of the adult participants made a positive improvement in at least one food group.

Summary of Food Group Servings Increase

Additional data from a subset of the EFNEP graduates support the positive impact EFNEP has had on fruit and vegetable consumption. Results show that:

44% (923 of 2,083 graduates) now serve more than one kind of vegetable to their family each day;
49% (3,868 of 7,861 graduates) now eat more than one kind of vegetable each day;
45% (4,293 of 9,528) graduates) now eat more than one kind of fruit each day;
57% (3,506 of 6,127 graduates) now more often offer 5 servings of fruits and vegetables to their families to eat each day;
49% (1,598 of 3,238 graduates) now eat 3 or more servings of vegetables each day.
The Cost of Health Care and Emergency Food Assistance

Multiple cost-benefit analyses highlight the value of EFNEP. A Virginia study found that for every $1.00 invested in EFNEP, $10.64 in benefits from reduced health care costs can be expected. An Iowa study showed $8.03 in benefits; a consortium of six Midwestern states found $8.82; and Oregon had $3.63 in benefits. Another study in Tennessee looked at food expenditures and found that for every $1.00 spent to implement EFNEP, $2.48 is saved on food expenditures. This reduces the need for emergency food assistance and saves money for other necessities.

What Are The Participants Saying About EFNEP?

An EFNEP family in Iowa, had three children. Both parents were of a larger stature. Their 10-year old daughter was also of a large frame. The parents were concerned because she was bigger than most of her classmates. She apparently would eat large amounts of food for dinner, only to feel ill afterward. The parents did not want to make a big issue of it, but were concerned and did not know what to do. The EFNEP Program Assistant presented the Feeding Children lesson and did food recalls for all the children. As a result, they found out there were no snack times for the children. The mom said she did not allow them to eat between meals in an effort to control her daughter's weight. It was also noted that the children had nothing to eat from lunch until 7:30 p.m. They ate when their father got home from work and then went to bed at 9:00 p.m. The family changed their meal pattern to include a healthy planned snack after school. The daughter no longer stuffed herself at dinner and no longer felt ill at bedtime. Her mother felt she was actually eating less and using more of these calories early in the evening.

In Michigan, one homemaker wrote, "When I first heard about the nutrition class, I must admit that I only did it for the free cookbook. But to my surprise I actually learned a lot and the recipes were a hit with my whole family and they found out that you don't need all that fat and grease to make food taste good. But what really made me start using the cookbook was when recently I was diagnosed as a diabetic. I was told that if I ate right and exercised that I would not need the pills I was taking. So I quickly looked up some recipes and since they were all healthy, I started making them. I'm proud to say that since cooking from the book and exercising I have lost between 30 and 35 pounds and my blood sugar has returned to normal. I thank God for Mrs. Carter and your program. I can honestly say it saved my life."
A Program Assistant in North Carolina enrolled an overweight homemaker in the EFNEP program. At that time she weighed 322 pounds. The Program Assistant and the homemaker focused on the lower calorie food choices in each lesson and to this date the homemaker has lost 78 pounds. She has lost the weight by drinking lots of water, learning what a serving is, and reading food labels. On her last visit to her doctor her blood pressure had gone down by several numbers, and her cholesterol was below 200. She credits the EFNEP lessons for her success. Her success has sparked interest from some others who even enrolled in EFNEP. A class that started with two participants has grown to six participants all of whom are interested in learning to eat right and light.

For more information on EFNEP visit https://nifa.usda.gov/program/expanded-food-and-nutrition-education-program-efnep

or to find a local Extension Agent in your area, visit https://nifa.usda.gov/land-grant-colleges-and-universities-partner-website-directory
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