Youth Participants

Youth participants engage in a series of sessions delivered over time. The nutrition education is provided in group settings and engages youth through interactive learning experiences.

The sessions increase youth’s awareness of and behaviors related to healthy eating and active lifestyles. The sessions include food and physical activity experiences.

As a result of participating in the series:

+ 82% improved their ability to choose healthy foods.
+ 52% increased their frequency of being physically active.
+ 44% improved their food safety practices.
+ 47% increased their food preparation skills.

New York State

Counties highlighted in color have at least one EFNEP staff member within the county. Counties of like color represent the five regions of the state. Service crosses county boarders, as needed.

Contact Us

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Helping Families Eat Better for Less! 2015

The Expanded Food and Nutrition Education Program (EFNEP) is administered through the U.S. Department of Agriculture’s (USDA) National Institute of Food and Agriculture (NIFA) and is offered through land-grant universities.1 EFNEP has been delivered by Cornell Cooperative Extension (CCE) since 1969.

EFNEP helps low-income families and children improve their nutritional well-being, through a series of hands-on, interactive lessons where participants learn and are encouraged to improve their food and physical activity knowledge, skills and behaviors.1

1 The Expanded Food and Nutrition Education Program Policies

The Challenge

The poverty rate in NYS is 16% with 22% of children under the age of 18 living in poverty.2 The percentage of adults who are overweight or obese increased from 42% in 1997 to 61.3% in 2013.3 The percent of adults who are obese increased to 25.4%, and currently a third of New York’s children are obese or overweight.4

Overweight and obesity are associated with serious chronic health problems, including diabetes, hypertension and heart disease. People living in poverty are more likely to suffer from a variety of chronic health problems, both psychological and physical. While only one component of the overweight and obesity issue, and one of a host of concerns for people in poverty, nutrition education can mitigate those associated with suboptimal food choice practices..

2 New York State Community Action Association Poverty Report, 2014


Demonstrating Results

Youth Participants

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Milk: A Healthy Choice

“It was awesome that we were able to eat together as a family in the class! I realize we need to do more of at home!”

- Participant Central-Southern Tier Region

“I am very happy because now I know what foods are healthy. What I learned in the class helps me to share the information with my wife. Our family is eating healthier. By the time the workshop ended, I lost 20 pounds!”

- Participant Metropolitan Region

Cooking together encourages children to try new foods!
During FFY2015, EFNEP was delivered in 27 of the 62 counties in New York State with nutrition education provided by 89 highly qualified and trained paraprofessional staff, reaching 14,681 adult and youth participants, impacting the lives of 32,881 New York low-income families.

Participants complete at least 6 nutrition education sessions:
+ 5,767 adults - mean of 7.2 ± 1.0 sessions
+ 5,057 youth - mean of 6.1 ± 0.7 sessions

**Economic Implications**

EFNEP has been shown to be cost-effective:
+ Saving about $10 in health costs for every EFNEP dollar invested.

Participants save money while continuing to make more healthful choices:
+ Saving about $5 in food costs for every EFNEP dollar invested.

Participants increase the servings of vegetables and fruit consumed:
+ An increase of 439.4 tones of produce with a minimum economic value of $431,000.

**Reaching Diverse Audiences**

Race & Ethnicity*

<table>
<thead>
<tr>
<th>Race</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>White</td>
<td>40%</td>
</tr>
<tr>
<td>Black</td>
<td>28%</td>
</tr>
<tr>
<td>Hispanic</td>
<td>42%</td>
</tr>
<tr>
<td>Non-Hispanic</td>
<td>58%</td>
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</tbody>
</table>

*42% Hispanic; 58% Non-Hispanic

Age Range and Gender*

<table>
<thead>
<tr>
<th>Age Range</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Less Than 18</td>
<td>15%</td>
</tr>
<tr>
<td>18 - 29 Years</td>
<td>21%</td>
</tr>
<tr>
<td>30 - 39 Years</td>
<td>19%</td>
</tr>
<tr>
<td>40 - 49 Years</td>
<td>15%</td>
</tr>
<tr>
<td>50 - 64 Years</td>
<td>25%</td>
</tr>
<tr>
<td>65 Years and Older</td>
<td>11%</td>
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</table>

*67% Female; 33% Male

**Demonstrating Results**

**Adult Participants**

Adult participants engage in a series of sessions, delivered over time to facilitate knowledge gain, skill development and behavior change. The sessions are delivered in an interactive manner, with hands-on activities which appeal to the different learning styles of adult participants.

The series contains sessions on:
+ planning healthy meals,
+ stretching the families food resources,
+ using safe food handling and storage practices, and
+ preparing tasty recipes.

Each session contains a 5-10 minute structured physical activity break. The breaks are intended to demonstrate the ease with which activity can be integrated into participants’ lives, as well as provide practical examples of things that can be done outside of the classroom.

As a result of participating in the series:
+ 82% improved their food resource management skills.
+ 90% improved their diet quality practices.
+ 66% improved their food safety practices.
+ 47% increased their frequency of being physically active.

Studies of retention of behavior change indicate that these changes are maintained four years post-education.4

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