

NUTRITION EDUCATION PROGRAM 2016 ANNUAL REPORT

OUR FOCUS

The Kentucky Nutrition Education Program works in all 120 counties to improve the lives of limited-resource Kentuckians through education and changes in behavior and in community. Through the Supplemental Nutrition Assistance Program Education (SNAP-Ed) and the Expanded Food and Nutrition Education Program (EFNEP), the University of Kentucky Cooperative Extension Service has agents and nutrition assistants across the state who are dedicated to improving lives in their communities.



OUR CHALLENGE

Poverty

In Kentucky, household median income is **\$45,215**, which is much lower than the U.S. median of **\$55,775**.¹ Kentucky has high rates of poverty and food insecurity when compared to the United States as a whole.¹

	Kentucky	U.S.
Total Poverty	18.5%	14.7%
Child Poverty	25.9%	20.7%
Food Insecurity	17.6%	13.7%
Very Low Food Secure	7.3%	5.4%

In 2014, an estimated **5,615** Clark County residents lived in poverty, and **2,015** of them were children. This is a **8.0%** increase in total poverty and **13.3%** increase in child poverty since 2007.²

SNAP benefits

Participation in the SNAP program among those who are eligible for its benefits is higher in Kentucky than in the U.S. as a whole.¹

In 2015, **5,700** Clark County residents received SNAP benefits, a **24.4%** increase since 2007.³

	Kentucky	U.S.
SNAP Participation	91%	83%



Obesity

Nearly half of all American adults experience one or more preventable, diet-related chronic conditions, such as high blood pressure, cardiovascular disease, type 2 diabetes, and obesity.⁴ Kentucky has a high prevalence of hypertension, diabetes, and obesity, ranking in the top 10 when compared to other states.⁵ A large body of evidence shows that healthy eating habits and regular physical activity can help people achieve and maintain good health and reduce the risk of chronic disease throughout life.⁴

In 2013, **8,160** Clark County residents were considered obese, representing **30.6% (36.6%-25.2%)** of the county's population.⁶

OUR SOLUTION

Provide hands-on, nutrition education to limited-resource audiences, focusing on:

- Buying and preparing healthy foods
- Developing new meal planning and cooking skills
- Adopting new healthy lifestyle behaviors
- Managing SNAP resources

In 2016, 5,304 Clark County residents with limited resources participated in nutrition education lessons.

OUR RESULTS

IN CLARK COUNTY

Lifestyle improvements

In 2016, 90% of adult participants made a positive change in food group choices and 74% showed improvement in one or more food safety practices. In addition, 75% began to plan meals in advance more often and 77% used the “Nutrition Facts” on food labels to make food choices more often. Youth participants also experienced behavior changes, with 77% improving their ability to choose healthy foods.

OUR SUCCESS

Senior nutrition improves through monthly education programs

Poor nutrition is one of the biggest threats to the health of older adults. According to the USDA Healthy Eating Index: Diet Quality of Older Americans, the overall diet quality of those age 65 and older did not improve over eight years. Recommendations are for older adults to increase their intake of whole grains, dark leafy vegetables, and dairy products and decrease added sugars and fats.

To address this issue, the Clark County Extension Service Family and Consumer Sciences Extension agent collaborated with the James B. Allen Generation Center, a senior citizens center for Clark County residents age 60 and older, to conduct monthly nutrition

programs. Topics included the preparation and nutritional value of fruits, starchy vegetables, red and orange vegetables, as well as information on sugar and sugar substitutes, healthy fats, dairy products, super foods, and heart health. Food demonstrations and taste testing were conducted using Plate It Up! Kentucky Proud and SNAP-Ed nutrition recipes. Plate It Up! Kentucky Proud recipes use locally grown fresh produce.

Follow-up discussions found that all program participants tried one or more new foods, 90% increased fruit and vegetable consumption, 80% made healthy fat substitutions, and 75% increased consumption of healthy dairy products.



SOURCES:

1. Frac.org/reports-and-resources/national-and-state-program-data-2, accessed December 2016
2. U.S. Census Bureau, Small Area Income and Poverty Estimates
3. Kentucky Department for Public Health, Cabinet for Health and Family Services, Statewide Summaries, December 2007, 2013, 2015
4. 2015-2020 Dietary Guidelines for Americans
5. Stateofobesity.org, accessed September 2016
6. Centers for Disease Control and Prevention (CDC), County Data Indicators, Obesity Prevalence

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