

## 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**.<sup>1</sup> Kentucky has high rates of poverty and food insecurity when compared to the United States as a whole.<sup>1</sup>

|                             | Kentucky | U.S.  |
|-----------------------------|----------|-------|
| <b>Total Poverty</b>        | 18.5%    | 14.7% |
| <b>Child Poverty</b>        | 25.9%    | 20.7% |
| <b>Food Insecurity</b>      | 17.6%    | 13.7% |
| <b>Very Low Food Secure</b> | 7.3%     | 5.4%  |

In 2014, an estimated **9,436** Harlan County residents lived in poverty, and **2,684** of them were children. This is a **5.1%** increase in total poverty and **-4.7%** decrease in child poverty since 2007.<sup>2</sup>

#### 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.<sup>1</sup>

In 2015, **10,394** Harlan County residents received SNAP benefits, a **23.7%** increase since 2007.<sup>3</sup>

|                           | Kentucky | U.S. |
|---------------------------|----------|------|
| <b>SNAP Participation</b> | 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.<sup>4</sup> Kentucky has a high prevalence of hypertension, diabetes, and obesity, ranking in the top 10 when compared to other states.<sup>5</sup> 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.<sup>4</sup>

In 2013, **7,852** Harlan County residents were considered obese, representing **36.5%** (**41.8%-31.4%**) of the county's population.<sup>6</sup>

## 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, Harlan County residents with limited resources participated in nutrition education lessons 27,387 times.

## OUR RESULTS

### IN HARLAN COUNTY

#### Lifestyle improvements

In 2016, 83% of adult participants made a positive change in food group choices and 89% showed improvement in one or more food safety practices. In addition, 83% began to plan meals in advance more often and 89% used the “Nutrition Facts” on food labels to make food choices more often. Youth participants also experienced behavior changes, with 89% improving their ability to choose healthy foods.

## OUR SUCCESS

### Holiday Cooking School is a hit with 200 participants

According to state health data, Harlan County has a high prevalence of diabetes, cancer, heart disease, and obesity. Research shows that a diet rich in fruits and vegetables may reduce the risk of developing diabetes, heart disease, and high blood pressure, and may protect from some cancers. The average American consumes only three servings of fruits and vegetables each day and experts say we need to eat more.

To address these concerns, Family and Consumer Sciences agents in the Wilderness Trail Area conducted a Wilderness Trail Area Holiday Cooking School on fruits and vegetables. Approximately 200 participants from eight counties attended. Each participant sampled recipes that allowed them to try new ways to prepare fruits and vegetables. Participants also observed

two presentations on healthy cooking techniques and received a cookbook containing all of the recipes.

As a direct result of the program, 99% of participants said they learned new ways to prepare fruits and vegetables, 97% said they had learned new cooking techniques at the cooking school, 95% learned new ways to eat healthier by using more fruits and vegetables and 91% said they intended to use more fruits and vegetables in their cooking.

Four months after the event, a follow-up survey was sent to a sampling of the participants. Of those surveyed, 91% used the recipes that they received at the cooking school, 81% now use more fruits and vegetables in their cooking, 76% have used new ways to cook fruits and vegetables, and 73% used new cooking techniques that they learned at the cooking school.



#### SOURCES:

1. [Frac.org/reports-and-resources/national-and-state-program-data-2](http://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](http://Stateofobesity.org), accessed September 2016
6. Centers for Disease Control and Prevention (CDC), County Data Indicators, Obesity Prevalence

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