



Nutrition Education Program

2017 Annual Report: Laurel County

Our Focus

The 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.



University of Kentucky
College of Agriculture,
Food and Environment
Cooperative Extension Service

Our Challenge

Poverty

In Kentucky, household median income is \$46,659, which is much lower than the U.S. median of \$57,617.¹ 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%	14.4%
Child Poverty	25%	19.8%
Food Insecurity	17.3%	13%
Very Low Food Secure	7.4%	5.2%

In 2014, an estimated 14,610 Laurel County residents lived in poverty, and 4,832 of them were children. This is a 17.7% increase in total poverty and 17.1% 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, 12,899 Laurel County residents received SNAP benefits, a 24.3% 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, 16,765 Laurel County residents were considered obese, representing 37.8% (33.9%-42.3%) 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 2017, **15,113** Laurel County residents with limited resources participated in nutrition education lessons.

Our Results

IN LAUREL COUNTY

Lifestyle improvements

In 2017, **92%** of adult participants made a positive change in food group choices and **69%** showed improvement in one or more food safety practices. In addition, **53%** began to plan meals in advance more often and **58%** used the “Nutrition Facts” on food labels to make food choices more often. Youth participants also experienced behavior changes, with **98%** improving their ability to choose healthy foods.

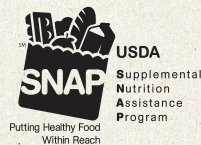
Our Success

Victims of domestic violence find hope in nutrition classes

Abused women often suffer more than physical damage. The Laurel County SNAP-Ed assistant began working with a local domestic violence services shelter and the assistant's visits quickly increased from monthly to weekly. After three monthly visits and two weekly visits, one resident told the assistant how much she appreciated seeing her. As the assistant gained the trust of other residents, they began to pay more attention to their nutritional choices. Having taken inventory of her habits, one appreciative resident cut sugary drinks from her diet, started walking up to a mile daily, lost 15 pounds, watched her portions and saved money at the grocery store. She felt so good that she even got her driver's permit. She said she'd been low for too long and now “no one can hold me down.”



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Family and Consumer Sciences Extension



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SOURCES: 1. Frac.org/reports-and-resources/national-and-state-program-data-2, accessed December 2017; 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 December 2017; 6. Centers for Disease Control and Prevention (CDC), County Data Indicators, Obesity Prevalence

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