

EFNEP

EXPANDED FOOD AND NUTRITION EDUCATION PROGRAM



2012 NC Cooperative Extension **Swain County Report**

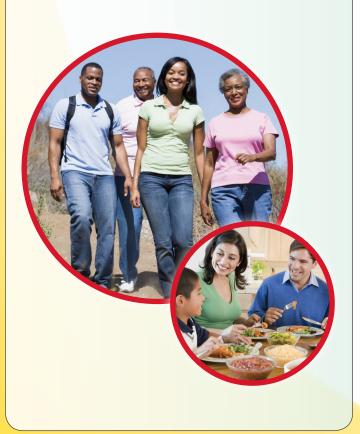
75 Limited Resource Youth

76% increased variety of foods in their diet

83% increased their knowledge of human nutrition

96% increased their ability to select low-cost, nutritious foods

31% improved practices in food preparation and safety



What Is EFNEP?

EFNEP serves limited-resource families with young children, school-age youth, and pregnant teens through a series of lessons offered by paraprofessionals and volunteers, many of whom are indigenous to the population.

Using "hands-on" experiences, participants are taught to: make wise choices with their food dollars, improve eating habits, and practice food safety principles.

EFNEP is offered through North Carolina Cooperative Extension as a part of university outreach at NC State University and NC A&T State University. In 2012, North Carolina EFNEP served 57 counties.

Chronic Disease in North Carolina: A Growing Problem

When compared to other states, North Carolina ranks poorly in health. In 2009, *North Carolina stood 37th among the 50 states for overall health*. The state ranks low in many health indicators, including obesity prevalence (41st), premature death (40th), and cancer death rates (35th). *Fewer adults in North Carolina are physically active and more are obese* when compared to national averages.²

Especially concerning is that low income, non-white populations are disproportionally affected by these indicators. In North Carolina, 42.4% of non-Hispanic blacks are obese, compared to 26.7% of non-Hispanic whites. In addition, 15.3% of non-Hispanic blacks have diabetes, compared to 8.4% of non-Hispanic whites and 4.9% of Hispanics.³

References

1. United Health Foundation. America's health rankings: North Carolina. America's Health Rankings website. http://www.americashealthrankings.org/yearcompare/2008/2009/NC.aspx

2. Ibid.

3. Young, L.A., & Potru, P. (2012) Diabetes in North Carolina: Descriptive epidemiology and meaningful use of electronic health records. NC Med J, 72(5): 383-386.

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