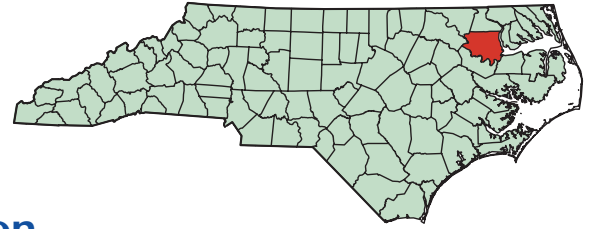


EFNEP

EXPANDED FOOD AND NUTRITION
EDUCATION PROGRAM



2015 NC Cooperative Extension Bertie County Report

77 families participated in EFNEP

- 14% of EFNEP participants were also WIC participants.
- 79% of EFNEP participants enrolled in one or more food assistance programs.

EFNEP Makes a Real Difference for Limited Resource Adults

- 74% improved in one or more food safety practices
- 91% improved in one or more nutrition practices
- 83% improved in one or more food resource management practices
- 44% of participants increased the amount of daily physical activity
- 97% of participants improved their diet
 - 57% increased fruit consumption
 - 60% increased vegetable consumption
 - 60% increased consumption of calcium-rich foods

EFNEP Makes a Real Difference for 802 Limited Resource Youth

- 94% of children and youth improved their abilities to choose foods according Federal Dietary Recommendations or gained knowledge.
- 75% of children and youth used safe food handling practices more often or gained knowledge.
- 64% of children and youth improved their physical activity practices or gained knowledge.



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 2015, North Carolina EFNEP served 47 counties.

Food Insecurity, Chronic Disease and Economic Implications for North Carolina

Food insecurity and chronic disease affect both the health of our population and our economy. Children living in food insecure households are at greater risk of developmental and academic problems as well as nutritional deficiencies and nutrition-related illnesses. Addressing this issue in North Carolina is essential to the preparation of our future workforce and economic growth in our state. The challenges are great.

Between 2008 and 2012, North Carolina saw a rise from 22% to 24% in the number of working low-income families with children. This 2% increase accounts for 27,000 additional families with children earning incomes at or below the poverty level. During the same time frame, the number of children living in poverty in North Carolina increased from 20% to 26%.¹

When compared to other states, North Carolina ranks poorly in health. 29.7% of adults in North Carolina are obese. What is even more alarming is that 15.4% of 2–4 year olds living in North Carolina are obese, making our children the 7th most obese in the nation. Additionally, North Carolina has the 18th highest rate of diabetes and the 11th highest rate of hypertension.²

References

1. Population Reference Bureau, analysis of data from the U.S. Census Bureau, 2008–2012 American Community Survey. Population Reference Bureau, analysis of data from the U.S. Census Bureau, Census 2000 Supplementary Survey, 2001 Supplementary Survey, 2002 through 2012 American Community Survey.
2. (2015) The state of obesity in north carolina. Retrieved from the State of Obesity: Better Policies for a Healthier America website: www.stateofobesity.org/states/nc/.

Distributed in furtherance of the acts of Congress of May 8 and June 30, 1914. North Carolina State University and North Carolina A&T State University commit themselves to positive action to secure equal opportunity regardless of race, color, creed, national origin, religion, sex, age, or disability. In addition, the two Universities welcome all persons without regard to sexual orientation. North Carolina State University, North Carolina A&T State University, U.S. Department of Agriculture, and local governments cooperating.



United States Department of Agriculture
National Institute of Food and Agriculture