



# Nutrition for Family Living

Susan Nitzke, Nutrition Specialist; susan.nitzke@ces.uwex.edu  
Sherry Tanumihardjo, Nutrition Specialist; sherry.tan@ces.uwex.edu  
Amy Rettammel, Outreach Specialist; arettamm@facstaff.wisc.edu  
Gayle Coleman, Nutrition Specialist; gayle.coleman@ces.uwex.edu  
Heather Harvey, Nutrition Specialist; heather.harvey@ces.uwex.edu

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## May, 2006 Topics

Child and Adult Rates of Overweight and Obesity Continue to Rise

Nutrition Education for Low-Income Adults: Learners' reasons for participating and what they say they get out of it.

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## Child and Adult Rates of Overweight and Obesity Continue to Rise

By Susan Nitzke

Between 1980 and 2002, obesity prevalence rates doubled in adults and tripled in school-age children. A new study shows that overall rates are continuing to rise. Ogden and colleagues from the U.S. Centers for Disease Control and Prevention examined height and weight measurements from the National Health and Nutrition Examination Survey (NHANES).

Using standard definitions (child overweight = BMI of 95th percentile or higher for age-based growth charts; adult obesity = BMI of 30 or higher), 17% of children and adolescents aged 2 to 19 years were overweight and 32% of adults were obese in 2003-2004. There was a significant increase in rates of overweight for girls from 14% to 16% and from 14% to 18% for boys in the 4-year period from 1999-2000 to 2003-2004.

Obesity rates for men increased from 27% to 31% during that time period. Rates for women stayed about the same at 33%. The most recent data show that about 30% of non-Hispanic white adults were obese, compared to 45% of blacks and 37% of Mexican Americans. There were age differences as well. Adolescents were more likely to be overweight than young children. Up to age 80, adults were more likely to be overweight with advancing age.

Implications for Extension educators: The prevalence of overweight among children, adolescents and adults is continuing to increase, with the possible exception of adult women. Now more than ever, individuals and communities need to make sensible changes to adopt or promote healthy lifestyle practices. Resources available to Extension Professionals for helping communities use effective strategies include:

- School Wellness Policy Information  
<https://www.uwex.edu/ces/flp/apps/flrc/team/eating/resource/wellness.cfm> (FLRC login required)
- Weight and Health Resources <http://www.uwex.edu/ces/flp/demographics/weight.cfm>  
(Note: Weight and Health demographic pieces are temporarily unavailable while being updated but other resources are listed at this site as well).
- Obesity Webography from Extension and Steenbock Library  
<http://steenbock.library.wisc.edu/extension/obesity.htm>

Reference: Ogden CL, Carrol MD, Curtin LR, McDowell MA, Tabak CJ, Flegal KM.  
Prevalence of overweight and obesity in the United States, 1999-2004. JAMA 2006;295:1549-1555.



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### Nutrition Education for Low-Income Adults: Learners' reasons for participating and what they say they get out of it.

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By Amy Rettammel

Food Stamp Nutrition Education (FSNE) and the Expanded Food and Nutrition Education Program (EFNEP) across the country continually work to demonstrate impact. Evaluations are usually tied to outcomes that educators have identified based on the content being taught. Researchers from Cornell University asked the question, "How do nutrition education program participants define program outcomes for themselves, based on their experience in the program?" The research findings, briefly summarized here, are published in the January/February 2006 issue of the *Journal of Nutrition Education and Behavior* (2006;38:42-49).

Researchers conducted 1-hour, in-person, audiotaped interviews with 18 nutrition program participants or recent program graduates. Participants attended 6-12 educational sessions. Most participants (13) attended group education sessions; the rest attended individual sessions. Participants were largely white, rural women.

After the interviews were completed, researchers analyzed participants' comments for themes. One finding was that participants shared their perceptions of program outcomes in the context of their motives for enrolling in a nutrition education program, as well as whether they could apply what they were learning in their current lives.

#### ***Motives for enrolling in a nutrition education program***

Researchers categorized participants' motives for enrolling, as listed below, using participants' own language to name the categories.

- Into healthy stuff  
Example: a mother of 4 had already made several changes to her family's diet before enrolling, like having less sweetened cereals and more fruits and vegetables available. Her mother's loss of sight to diabetes and her daughter's behavioral problems spurred her to enroll.
- Want to be healthy  
Example: a married mother of 5 had passed up a previous opportunity to participate in a nutrition education program because she had been a young, single, working mother making ends meet. At that time, she did not have the time nor the interest to participate. She enrolled this time around because she now felt ready to make sure her children and herself were eating a nutritious diet.
- For Job/Program  
Example: a woman joined because she thought it would be helpful in her social service job. She was not particularly interested in eating healthy.
- Cooking together  
Example: a working mother of 1 enrolled because the program was free, she wanted to learn how to be a better cook, and it was something to do - she saw limited other opportunities for learning new things in her town.
- Care for kids  
Example: a young mother who was recruited through her Head Start program joined because of her children. Cooking was something she didn't like to do, but rather was something she had to do.

Several participants mentioned multiple motives for enrolling in a nutrition program. In addition, as participants became more involved in the program, motives for continuing with the program emerged. Those motives included trust in the educator, enjoyment of social interaction with other participants, and reassessment of personal or family food choices.



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***Current Lives***

Participants described how their current lives influenced their food choices and ability to make dietary changes. For example, the timing of the program in their lives was key. Making changes was just too hard for a single mother of an infant who felt her life was too hectic; but for another woman who had already begun to make some changes on her own, the program helped her continue to make positive improvement. In addition, family reactions influenced dietary change – a single father of teenagers received support and encouragement from his children, whereas one grandmother described limits to her ability to apply what she learned due to a granddaughter who was a picky eater.

***Participant Perceived Outcomes***

Researchers found that participants' reported motives for enrolling in a nutrition education program were related to what they said they accomplished through the program. The table below illustrates this relationship.

<b>Participants who gave this reason for enrolling in the program initially....</b>	<b>...said these were the kinds of things they accomplished by the end of the program:</b>
Into healthy stuff	They reported eating healthier – they added new knowledge and skills they learned during the program to what they had already been doing.
Want to be healthy	They reported now being ready to make a new start.
For Job/Program	They reported being ready to make a new start, some saying they surprised themselves.
Cooking together	Participants in these two categories expressed similar accomplishments: increased awareness of changes they could make, reassessment of their current food choices, and increased readiness to make a change. No participants in these categories reported making any changes.
Care for kids	

***What are the implications for Extension Nutrition Education?***

The results of these interviews illustrate the variety of reasons why individuals take advantage of Food Stamp Nutrition Education and EFNEP. In addition, it is apparent from these particular interviews that a number of factors influence program outcomes for an individual – initial reasons for enrolling, current life situations, and things that keep participants in the programs once they are there. As we plan our teaching and evaluation efforts, it is important to consider these factors. Some ways to incorporate these considerations include using learner-centered educational methods (i.e. Facilitated Dialogue and Motivational Interviewing) and using evaluation methods that allow participants to reflect on their own learning.