

Nutrition and Physical Activity

System/Environment: Individuals and Families

Inputs	Outputs			Outcomes	
	Activities	Participation	Initial	Intermediate	Long Term
<p>Financial Resources</p> <ul style="list-style-type: none"> • Extension Funding • FSNEP/EFNEP • Public In-Kind and Private Cash • Private In-Kind <p>Planning Processes</p> <ul style="list-style-type: none"> • Program Planning • Social Marketing <p>Materials</p> <ul style="list-style-type: none"> • Curriculum • Educational Media • Campaign <p>People</p> <ul style="list-style-type: none"> • Expertise (funded, matched, other) • Accountability: Elected/ Appointed Officials • Intra-Institutional Commitment: Membership: Networks, Coalitions, Consortia, etc 	<p>Conduct education and deliver targeted messages on dietary quality using the following strategies:</p> <p>Direct Methods</p> <ul style="list-style-type: none"> • Individual/One on One • Small Group • Large Group <p>Indirect Methods</p> <ul style="list-style-type: none"> • Newsletters • News Releases • Kiosks • Internet <p>Media Campaign</p>	<p>Individuals/Households</p> <p>Direct Methods (# and %)</p> <ul style="list-style-type: none"> • Counted: Gender, Ethnicity, Adult or Youth • Estimated <p>Indirect Methods</p> <ul style="list-style-type: none"> • Counted • Estimated <p>Media Circulation</p> <p>For FSNEP, Evidence that participants represent Food Stamp households or those eligible for the Food Stamp Program.</p>	<p>Individuals gain awareness, knowledge and skills related to:</p> <ul style="list-style-type: none"> • Improved attitudes about healthy eating • Increased knowledge of healthy food choices • Improved skill in selection of healthy foods • Improved skill in preparation of healthy foods • Increased awareness/knowledge of benefits of physical activity (burn calories & control weight, increased stamina, cardiovascular health, reduce risk of cancer, diabetes, improved personal appearance, etc.) • Increased awareness/knowledge physical activity recommendations for health 	<p>Individuals incorporate skills; Change behaviors related to:</p> <ul style="list-style-type: none"> • Increased adoption of healthy food practices • On-going use of healthy weight management practices • Adoption of recommended diet-related practices for disease prevention and management • Increased participation in regular physical activity • Family/individual participation in community events that increase physical activity 	<p>Individuals experience:</p> <ul style="list-style-type: none"> • Decreased risk factors for nutrition-related health problems & chronic diseases that are affected by diet and physical activity • Decreased incidence of complications of chronic diseases that are affected by diet and physical activity

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Outcome Indicators		
Initial	Intermediate	Long Term
<p>___% of (x) Individuals who demonstrate ability to:</p> <ul style="list-style-type: none"> • Plan menus and choose foods around Food Guide Pyramid (FGP) and Dietary Guidelines (DG) • Adjust recipes and/or menus to achieve certain goals (reduced calories, fat, sodium, etc., or increased nutrients & fiber) • Select/use preparation and storage techniques to conserve nutrients or reduce fat, salt, or to improve taste • Classify foods based on original source (plant or animal) • Write a personal plan to adjust physical activity for health, fitness, weight control, etc. <p>___% of (x) Individuals who indicate an intent to adopt one or more healthy food/nutrition practices.</p> <p>___% of (x) Individuals who indicate an intent to begin or increase physical activity</p>	<p>___% of (x) Individuals demonstrate adoption of practice by:</p> <p>Improved live style practices based on the Food Guide Pyramid & Dietary Guidelines, such as</p> <ul style="list-style-type: none"> • Improved intake of food group servings • Improve intake of selected nutrients and • Improve behavior change related to decreased salt, fat, sugar and calories, or increased servings/variety of vegetables, fruits, whole grains, and low-fat milk. • Decreased use of supplements • Improved hydration state for physically active individuals • Implementation of a personal plan to increase physical activity, such as increased time/frequency engaged in activity per day; actually beginning a specific activity such as walking, hiking, bicycling. • Increased participation of individual/family in games and play that involve physical activity • Reduction in time spent in sedentary activities (such as watching TV and playing video games) 	<p>Individuals show:</p> <ul style="list-style-type: none"> • Decreased # of chronic disease risk factors. • Decreased # of chronic disease complications. • # (%) of individuals who achieved/maintained healthy weight * # (%) of individuals who achieved/maintained a moderately active lifestyle (30 minutes/day most days of the week)

Nutrition and Physical Activity

System/Environment: Community and Institutions

Inputs	Outputs			Outcomes	
	Activities	Participation	Initial	Intermediate	Long Term
<p>Financial Resources</p> <ul style="list-style-type: none"> • Extension Funding • FSNEP/EFNEP • Public In-Kind and Private Cash • Private In-Kind <p>Planning Processes</p> <ul style="list-style-type: none"> • Program Planning • Social Marketing <p>Materials</p> <ul style="list-style-type: none"> • Curriculum • Educational Media • Campaign <p>People</p> <ul style="list-style-type: none"> • Expertise (funded, matched, other) • Accountability: Elected/ Appointed Officials • Intra-Institutional Commitment: Membership: Networks, Coalitions, Consortia, etc 	<p>Develop/expand community partnerships to identify opportunities and eliminate barriers related to dietary quality using the following strategies:</p> <ul style="list-style-type: none"> • Community Assessment • Community Awareness Campaigns • Community Organizing • Community Integration of Services 	<p>Agencies/organizations addressing dietary quality concerns which target the Food Stamp population</p> <ul style="list-style-type: none"> • Number of Partnerships by Type, Sector and Level (local, regional, statewide) • Number of Inter-Organization Agreements/MOUs • Number and Description of Community-Based Efforts • Number and Description of Integrated Service Plans 	<p>Communities/ Institutions gain increased:</p> <ul style="list-style-type: none"> • Awareness among private and public sector leaders about nutrition-related challenges of low-income households/ individuals. • Involvement of community groups to address nutrition challenges/issues of low-income households 	<p>Communities/ Institutions:</p> <ul style="list-style-type: none"> • Identify barriers and enhancements to improved community diet quality. • Develop and implement plans to improve diet quality. • Increased community activities/facilities that encourage physical activity 	<p>Improved dietary quality status:</p> <ul style="list-style-type: none"> • Leaders/citizens are empowered to solve community food/nutrition challenges • Decreased community barriers to adoption of healthy nutrition practices.

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System/Environment: Community and Institutions

Outcome Indicators		
Initial	Intermediate	Long Term
<p>Communities/Institutions demonstrate increased composition and # of community:</p> <ul style="list-style-type: none"> • Groups reporting discussions held on dietary quality challenges of low-income people in that locality • Groups who report a commitment to collaborate on strategies to address dietary quality and physical activity challenges • Groups involved in needs assessment & program planning • Coalitions formed to address dietary quality and physical activity issues of low-income families or individuals 	<p>Communities/Institutions exhibit:</p> <ul style="list-style-type: none"> • Increased # of referrals of low-income individuals between agencies to facilitate provision of nutrition education • Adoption of a feasible written plan to address challenges and barriers to dietary quality and physical activity by community groups/agencies • Evidence of concrete actions on implementing plan for improving dietary • Evidence of concrete actions on implementing plan for encouraging physical activity in a community (such as planned community games and competitions) or development of safe walking/bicycling trails. 	<p>Communities/Institutions reflect improvements such as:</p> <ul style="list-style-type: none"> • More nutritious foods offered in schools or restaurants • Increased availability of certain foods in grocery stores or farmer's markets • Reduced challenges related to transportation of low-income individuals to grocery store, or food stamp and WIC offices • Larger number (percent) of food stamp and low-income individuals who report regular participation in physical activity.

Nutrition and Physical Activity

System/Environment: Social Structures, Policies or Practices

Inputs	Outputs		Outcomes			
	Activities	Participation	Initial	Intermediate	Long Term	
Financial Resources <ul style="list-style-type: none"> • Extension Funding • FSNEP/EFNEP • Public In-Kind and Private Cash • Private In-Kind Planning Processes <ul style="list-style-type: none"> • Program Planning • Social Marketing Materials <ul style="list-style-type: none"> • Curriculum • Educational Media • Campaign People <ul style="list-style-type: none"> • Expertise (funded, matched, other) • Accountability: Elected/ Appointed Officials • Intra-Institutional Commitment: Membership: Networks, Coalitions, Consortia, etc 	Create/revise social systems and public policies related to dietary quality using the following strategies: <ul style="list-style-type: none"> • Expert review/ comment on federal, state, and/or local public policies • Public Forums • Impact Seminars • Efforts to inform elected officials, food industry leaders (processors and retailers), farmers, educators, and other influential leaders 	Systems and policies related to dietary quality having an impact on the population <ul style="list-style-type: none"> • Number and description of multi-sector efforts that include universities, government agencies, private sector, non-profit agencies and governing/ licensing boards. • Description of systems and policy change efforts. 	Educators, media, other public and private representatives hold discussions re: policies, regulations, and industry practices that are barriers to dietary quality.	Educators, media, other public and private representatives work toward needed changes in laws, policies and practices.	Revision of laws, policies and practices related to dietary quality.	
						Outcome Indicators
					Identification and definition of: <ul style="list-style-type: none"> • Social/public policy issues/regulations and food industry practices that impact dietary quality and food availability for low-income families/ individual • Social/public policy issues and that create barriers to adequate physical activity (example: school policy for children affecting amount of physical activity in school). 	Evidence of action such as: <ul style="list-style-type: none"> • Number of expressed oral or written commitments to work toward needed changes • Letters, memorandums from legislators, agency heads, or food industry leaders that needed changes will be made • Achieved commitment of key citizens, government officials, and policy makers to work toward needed changes in laws, policies, and practices • Adoption of steps that will be taken by policy makers to achieve change