THE EXPANDED FOOD AND NUTRITION EDUCATION PROGRAM POLICIES

PREPARED BY NIFA PROGRAM LEADERSHIP | UPDATED 2021
I. BACKGROUND

EFNEP arose out of societal concern that millions of Americans were living in poverty; poor, underserved, and disenfranchised groups residing in rural and urban areas were going hungry; and existing efforts that focused on distributing excess agricultural commodities were insufficient in addressing these concerns (Brink, 2000). Between 1962 and 1967, USDA funded Federal Extension Service (FES) projects in Alabama, Massachusetts, Missouri, Rhode Island, and Texas to explore how to reach and teach low-income audiences. State and county-funded projects were also initiated. In 1968, FES Administrator Lloyd Davis called upon state Extension leaders to advance their nutrition education programs with emphasis on low-income families and the staff who work with them (as cited in Brink, 2000). Additionally, he requested $3,385,000 from Congress to hire program aides to provide intensive personal counseling and assistance to the low-income population. This request was based on programmatic experience and the successful results of the FES projects (Synectics Corporation, 1979, as cited in Brink, 2000). Funds were not appropriated. That same year, USDA Secretary Orville Freeman toured many impoverished areas of the United States and learned first-hand about one of the FES projects, the Alabama pilot. He followed up with a memorandum to President Lyndon B. Johnson and strongly urged that the USDA be authorized to “proceed with an expanded homemaker program” to reach the “sub-poor” where they live, earn their confidence, and then, change their way of living (as cited in Brink, 2000). The President authorized Section 32 funds. In July 1969 Congress allocated Smith-Lever 3(d) funds for the program for FY 1970. By 1974, the program became widely known as the Expanded Food and Nutrition Education Program (Brink, 2000).

From its inception, the intent of EFNEP was to train “paraprofessional aides” to reach the nation’s poorest families living in rural areas and city ghettos and teach them the knowledge, skills, attitudes, and behaviors necessary to have nutritionally sound diets, contribute to their personal development, and improve the total family diet and nutritional well-being (Freeman, as cited in Brink, 2000; US Congress, House, 1969; Public Law 97-98, 1981). Use of a peer educator or paraprofessional approach was based on results of the pilot projects, which “indicated that persons who came...
from the community to be served and who were generally from the same economic level had superior abilities to establish rapport and to communicate with potential participants” (Brink, 2000). This approach was deemed “an effective, cost-efficient strategy to reach and teach food and nutrition information and skills to low-income families” (Brink, 2000).

EFNEP has evolved over time to remain current and relevant for the audience that it serves. It has also stayed true to the legislative requirement of using a peer educator model to teach low-income families. Program participants gain knowledge, skills, and confidence to make informed choices about low-cost, nutritious foods, and to better manage their family food budgets and become more self-sufficient. Communities with EFNEP draw upon professional and organizational relationships to tackle social and health disparities associated with hunger, malnutrition, poverty, and obesity.

II. LEGISLATION

Refer to the Food, Conservation, and Energy Act of 2008 (or more recent Farm Bill) and annual federal budget for current legislative requirements, authorizations, and appropriations. See the end of this document for key legislative references.

III. OVERVIEW: PROGRAM CHARACTERISTICS

EFNEP funds are allocated to eligible land-grant universities in all states, U.S. territories, and the District of Columbia to have peer educators (paraprofessionals) teach program participants how to improve their nutritional health and well-being. EFNEP is characterized by a number of distinguishing features:

• EFNEP focuses on low-income families, with an emphasis on parents and other adult caregivers who have primary responsibility for feeding young children, pregnant teens, youth, and children.

• Peer educators (paraprofessionals) deliver educational content to program participants. Extension professionals train and supervise peer educators. Volunteers may assist with program delivery.

• Learning occurs through a series of lessons delivered in groups or one-on-one settings to allow participants time to apply the concepts that are taught.

• Delivery methods actively involve participants and support their retention of knowledge, practical application, and decision-making skills.

• Nutrition education follows a holistic approach and includes four core areas—diet quality and physical activity, food resource management, household food safety, and food security—to help families achieve a nutritionally sound diet.

• Coordination and collaboration with community partners strengthens available support systems to enhance participants’ success.

• Extensive networking and cooperation with other agencies and organizations increases program reach and educational opportunities.

• Social capital increases as participants express interest in additional Extension programs and other learning opportunities, experience further success, and then contribute to the communities in which they live. Social capital represents the increased community benefits that result as social networks and relationships are enhanced.

• EFNEP commits to working with the low-income population—those who are disenfranchised and who are the poorest of the poor.

Ultimately, EFNEP is about improving the nutritional health of vulnerable populations by teaching them skills and guiding them to make better decisions and by creating an environment that supports healthy choices through coordinated community and state efforts.

IV. PROGRAM SPECIFICS

PURPOSE

EFNEP contributes to the health of the nation by helping low-income families improve their nutritional well-being. This is accomplished through a series of hands-on, interactive lessons wherein program participants learn and are encouraged to improve food and physical activity behaviors in accordance with USDA/U.S. Health and Human Services (HHS) Dietary Guidelines, HHS Physical Activity Guidelines, USDA’s Food Guidance System (MyPlate and similar resources), and public health priorities, especially those related to improving nutritional health and food security. By so doing, EFNEP contributes to the reduction of health disparities typically associated with those who have limited financial resources. It is also vital in addressing major societal challenges, such as reducing childhood obesity and hindering the effects of chronic disease.

EFNEP further contributes to the health of the nation by working with community partners and informing key decision makers and stakeholders to support an improved food and physical environment for low-income populations. In working with others, EFNEP’s primary focus remains on increasing programmatic reach and facilitating participants’ ability to make desired changes as individuals and as families.

In addition, EFNEP contributes to the personal development of participants and program staff as they gain skills and confidence, both of which can transfer to other aspects of their lives. EFNEP fulfills this purpose by bringing together federal, state, and local resources and utilizing the vast grassroots infrastructure of Cooperative Extension within the Land-Grant University System.

PRIORITY

EFNEP uses a holistic nutrition educational approach. Participation should result in individuals and families experiencing improvements in four core areas:

• Diet Quality and Physical Activity—Improved diets and nutritional and physical well-being through the adoption of federal food and physical activity recommendations.

• Food Resource Management—Increased ability to buy, grow, or otherwise appropriately obtain, prepare, and store food that meets nutritional needs.

• Food Safety—Improved household food safety and sanitation practices.

• Food Security—Increased ability to get food directly—and from food assistance programs where necessary—to ensure having enough healthy food to eat.

Community involvement with EFNEP should result in:

• Increased referrals across programs, organizations, and community groups to address participants’ needs and to strengthen universities’ capacity with respect to EFNEP’s four core areas.

• Increased coordination, cooperation, and collaboration between universities and communities to accomplish local and state identified priorities associated with EFNEP’s four core areas.

More specific national guidelines and priorities are determined by EFNEP leadership at NIFA, with input from land-grant university partners and other stakeholders, in accordance with changes in USDA’s Food Guidance System, national trends, and program needs.

AUDIENCES

EFNEP includes programming to a diverse audience of adults, youth, and children with limited-financial resources. The focus should be on families. Specifically, EFNEP audiences include:

• low-income parents and other adult caregivers (such as grandparents and guardians) who have primary responsibility for obtaining and preparing food for their children, with emphasis on families and caregivers of young children;

• individuals and families experiencing improvements in four core areas:

EFNEP is for people who are healthy as well as those who are at risk for or are managing a chronic disease or condition. EFNEP is not for people who require medical nutrition therapy; such people should be referred to a registered dietitian or other appropriate health care provider.

* EFNEP is for people who are healthy as well as those who are at risk for or are managing a chronic disease or condition. EFNEP is not for people who require medical nutrition therapy; such people should be referred to a registered dietitian or other appropriate health care provider.
• low-income pregnant women/teens;
• low-income adolescent youth (middle school through high school—ages 13-18 years); and
• low-income children and pre-adolescent youth (kindergarten through elementary school—ages 5-12 years).**

EFNEP staff and program participants shall have equal access to benefits of the program and facilities without regard to race, color, national origin, age, disability, sex, gender identity, and religion.

Secondary audiences include community organizations and agencies that serve low-income youth and families, along with non-participating low-income individuals and families who would benefit from positive changes to the food and physical activity environment and policy or procedural decisions of key stakeholders and decision-makers.

CONTENT AND DELIVERY

EFNEP’s programmatic content and methodology are evidence- and research-based. EFNEP uses knowledge gained from social, behavioral, and biological sciences to continually improve the program and to address emerging issues. Content and methodology help bridge practical application of nutrition education with science.

EFNEP focuses on food-related practices to help program participants achieve personal and family wellness. Participants learn to:
• choose and eat foods of adequate variety and appropriate quantity and to be physically active to improve health and reduce the risk for chronic disease (core area: Diet Quality and Physical Activity);
• improve food resource management practices such as purchasing, selecting, or otherwise obtaining; preparing; and storing foods to increase the sustained availability of healthy foods (core area: Food Resource Management);
• practice safe food handling to reduce the risk of foodborne illness (core area: Food Safety);
• identify and use emergency and non-emergency food assistance, as needed, to ensure household food security (core area: Food Security).

The peer educators who deliver training must have a high school diploma or GED. Additional education is not considered an added benefit. It is much more important that these educators are:
• members of the communities they support;
• skilled or able to learn to teach a series of hands-on interactive lessons;
• committed to providing sound instruction;
• able to influence the lives of those they teach; and
• dedicated to reaching diverse low-income populations.

Peer educators are trained, supervised, and supported by university and locally-based professionals who have programmatic and discipline expertise. Volunteers may assist with direct teaching, participant recruitment, meeting arrangements, and other supporting roles. Depending on the extent of their involvement they, too, are supervised by university and locally-based professionals.

Peer educators provide a series of lessons directly over time in group or one-on-one settings. Emphasis is on providing sufficient contact with participants to teach them important food-related skills and to show measurable impacts on their behaviors. Lessons are learner-centered, which means that the needs and learning styles of participants form the basis of program content and delivery. Drawing upon the strengths and past experiences of participants leads to a richer learning experience. EFNEP uses interactive hands-on learning approaches, which may be reinforced by technology, innovative teaching techniques, and engagement with community partners. Other methods may support or complement direct teaching methods, but not replace them. Alternate teaching approaches must be pre-approved by the national office.

Educational materials (i.e., low-cost incentives) may be used to raise awareness and enhance understanding and involvement in EFNEP.

Professional EFNEP staff coordinate efforts and collaborate with community partners to improve the food and physical activity environment for participants and inform key decision-makers and stakeholders of changes that can positively impact the lives of the limited-resource population. Such activities must be clearly secondary and supportive to EFNEP’s principal purpose, which is to teach low-income families.

EFNEP also provides ongoing professional development opportunities for program staff through in-service education and other means, as appropriate, within the program context.

PLANNING, MONITORING, AND EVALUATION

EFNEP uses an integrated local, state/territory, and federal data collection and reporting system to guide participant education, inform program management, and assess program impact. Grant recipients submit a 5-year program plan—and annual updates in intervening years—to outline state/territory and local needs/opportunities, priorities, plans, and any other adjustments they intend to make to their programming. They also submit demographic and outcome/impact data annually as part of the data collection system. This information is used to monitor programming and to guide leadership decisions at both the federal and state/territory level.

Non-EFNEP funds may be used by states/territories to develop an evaluation plan that would further assess program impact and ensure accountability to participants, stakeholders, and funders. Such a plan should be consistent with current policies and best practices, include the use—or development—of evaluation instruments that evaluate program objectives and methods, and exhibit validity and reliability.

** Programming to children and pre-adolescent youth should be conducted in the context of families; i.e., parents and other primary adult caregivers should also receive nutrition information either directly or indirectly through their children. Programming for children 4 years old and younger should be conducted only if the parents or other primary adult caregivers are the primary target audience (i.e., the parents should be the primary recipients of the direct nutrition education effort). Any exceptions to these guidelines must be pre-approved by the national office.

V. FUNDING

EFNEP funds are administered as capacity Requests for Applications (RFAs). RFA approval is contingent, in part, upon an approved 5-year plan/annual update, budget sheet, budget justification, and timely submission of annual program data.

The majority (51) percent or more of the total annual Federal appropriation to each university is to be used for paraprofessional personnel and their support costs.

Although no match in funds is required, many states secure additional support for EFNEP through grants, donations, or other cash and in-kind resources. Among these are: office and educational supplies, ingredients and foods for hands-on learning, space, and assistance from volunteers and support staff.

Other funding sources support evaluation and programmatic research. Research helps ensure a strong evidence-based foundation for EFNEP, maintain programmatic effectiveness and relevance, and inform future program directions. Such
research also contributes greater understanding of the value and importance of nutrition education to low-income populations, which—in turn—can help inform the work of other researchers, program implementers, and policymakers.

For additional guidance on funding and award terms and conditions, see the NIFA Federal Assistance Policy Guide (http://nifa.usda.gov/resource/nifa-federal-assistance-policy-guide), current RFA, and/or FAQ link on the NIFA website (pending).

VI. SUPPORTING CORE ELEMENTS
EFNEP policies contained in this document are based upon federal legislation and recommendations of a national policy taskforce that was convened to provide stakeholder input. Members of the task force carefully considered the federal legislation and 1983 EFNEP policy document; current programming and teaching methods; programmatic trends and conditions; administrative and field staff input; perceptions of audience needs and skills; and the economic, technological, and social climate in which programming is conducted. They developed core programmatic elements that are considered essential to EFNEP’s success, and then used these core elements to develop policy recommendations. These core elements, outlined below, are intended to:

1) Define the essence of EFNEP—what it represents now and in the future; 2) Clarify EFNEP’s role with respect to national health policies and priorities; and 3) Provide a foundation for program policy review and revision in conjunction with legislation, regulations, scientific developments, and programmatic experience.

FOCUS ON PEOPLE

• Diversity—EFNEP respects diversity by considering and valuing the similarities and differences in race, ethnicity, and life experiences of staff and participants. Respect for diversity is reflected in hiring, training, and teaching practices and the development and use of educational/resource materials.

• Empowerment—EFNEP empowers staff and participants to make positive changes in their personal lives and communities. EFNEP improves self-esteem by recognizing success, offering continuing educational opportunities, and encouraging professional advancement. EFNEP provides ongoing professional development opportunities and encourages other possibilities for lifelong learning.

• Peer Delivery—EFNEP’s peer educator staff have knowledge and experience with the communities and the target audiences they serve, which catalyzes connections with participants and impacts learners by effectively influencing behavior change. Peer educators are supervised and supported by professionals with programmatic and discipline expertise.

• Strengthening Families—EFNEP reaches families through the parents/adult caregivers and through the youth and children. The nutritional health and well-being of present and future generations is enhanced as program participants gain skills for feeding themselves and their families.

EDUCATION FOR CHANGE

• Wellness—EFNEP contributes to the nation’s health by helping people with limited financial resources gain knowledge and skills related to the USDA’s Food Guidance System. Food preparation, handling, and storage practices are emphasized to reduce foodborne illness and increase food security. EFNEP also supports efforts to decrease health disparities typically associated with individuals who have limited financial resources.

• Foods Emphasis—EFNEP focuses on food-decision skills, such as how to access and prepare healthy foods, how to make better food choices, how to stretch food dollars, and how to handle food more safely.

• Learner-Centered—EFNEP’s programmatic content and delivery methods are based on the needs and learning styles of program participants. EFNEP builds upon the strengths and past experiences of learners to create a richer learning experience for its participants.

• Multiple Methods—EFNEP uses interactive hands-on learning methods, which are reinforced by technology, innovative teaching techniques, and engagement with community partners. Extension teaching methods support a healthy environment, including healthier food and physical activity choices.

• Evidence-Based—EFNEP’s programmatic content and methodology are based on practical experience and the results of current research. EFNEP uses knowledge gained from social, behavioral, and biological sciences to continually improve nutrition education and address emerging issues.

ACCOUNTABILITY

• Financial—Programs demonstrate the highest degree of fiscal responsibility, ethics, and honesty at federal, state/territory, and local levels.

• Programmatic—Measurable results are documented and reported. EFNEP strives to be accountable to participants, stakeholders, and funders.

• Legislative—EFNEP is implemented in compliance with federal and state/territory legislation, policies, and regulations.

• Staff—EFNEP administrators provide leadership, management, and supervision to ensure effective, efficient, and appropriate delivery of the program.

STRATEGIC PARTNERSHIPS

• Shared Responsibility—National guidelines and priorities are determined by EFNEP leadership at NIFA, with input from land-grant university partners and other stakeholders. They are then tailored and implemented by university partners to address local needs and situations.

• Cooperative Leadership—EFNEP serves in a leadership role to develop and sustain educational partnerships in communities, particularly with organizations and agencies that serve low-income populations.

• Integration—EFNEP develops and enhances strategic collaborative partnerships to improve participants’ health and well-being. EFNEP works with others to collectively address national health concerns such as obesity, nutrient deficiencies, and health disparities. These relationships are formed with public and private agencies and organizations.

• Combined Commitment—EFNEP distinctively addresses national nutrition and health priorities on a personal level through the vast infrastructure of the Land-Grant University Cooperative Extension System that connects counties in all states, U.S. territories, and the District of Columbia. Funding and programmatic leadership are provided through the combined resources of NIFA, other funds and in-kind resources that are leveraged/secured through state/territory and local partnerships, and federal and Land-Grant University/Cooperative Extension program leadership and experience.

PUBLIC VALUE

• Social Change—EFNEP helps strengthen individuals, families, and communities by teaching nutrition-focused decision-making and resource utilization skills; empowering individuals, families, and communities to be self-reliant; encouraging community engagement; and facilitating the development of employment skills. EFNEP also promotes teamwork, social responsibility, service, and leadership to support healthy lifestyles among staff, participants, and others. EFNEP commits enough time and resources to impact participants’ behavior and to enhance social, financial, and human capital.

• Economic Change—Through nutrition education, EFNEP helps decrease health care costs related to diseases associated with obesity, overweight and other associated conditions, as well as conditions related to under-nutrition, such as anemia, osteoporosis, and developmental delay.

• Scientific Application—EFNEP staffing, education methods, and results help provide a bridge between the practical application of nutrition education and science.

• Public Policy/Legislative Influence—EFNEP helps demonstrate effective educational models, which, in turn, help shape and inform public policy and legislation.
REFERENCES


KEY LEGISLATIVE REFERENCES

The intent of Congress and agreed upon policy by NIFA administration on the Expanded Food and Nutrition Education Program (EFNEP) have foundation in legislative acts pertaining to the initiation and operation of the program.

2008
Section 7403 of the Food, Conservation, and Energy Act of 2008 (Public Law 110-246) (FCEA) amended section 3(d) of the Smith-Lever Act (7 U.S.C. 343(d)) to provide the opportunity for 1862 and 1890 land-grant institutions, including Tuskegee University and West Virginia State University, and the University of the District Columbia, to compete for and receive these funds directly from the Secretary of Agriculture. However, Section 1425 of the National Agricultural Research, Extension, and Teaching Policy Act of 1977 (NARETPA) provides a statutory formula for the distribution of funds appropriated for the Expanded Food and Nutrition Education program (EFNEP). Section 7116 of FCEA amended NARETPA section 1425 to revise this statutory formula effective October 1, 2008.


CSREES Update - September 17, 2008 Cooperative State Research, Education and Extension Service (CSREES) Administrator clarifies that Section 7403 of the Food, Conservation, and Energy Act of 2008 (i.e., 2008 Farm Bill) amended section 3(d) of the Smith-Lever Act, which requires that funds be awarded competitively and does not apply to EFNEP, whose funds are awarded according to a statutory formula provided in section 1425 of the National Agricultural Research, Extension and Teaching Policy Act of 1977. (Accessed 28 January 2013)


1981
The Agriculture and Food Act 1981-Nutrition Education Program, Sec. 1423. Section 1425 of the National Agricultural Research, Extension, and Teaching Policy Act of 1977 (7 U.S.C. 3175): (b) In order to enable low-income individuals and families to engage in nutritionally sound food purchasing and preparation practices, the expanded food and nutrition education program presently conducted under section 3(d) of the Act of May 8, 1914 (7 U.S.C. 343 (d)), shall provide for the employment and training of professional and paraprofessional aides to engage in direct nutrition education of low-income families and in other appropriate nutrition education programs. To the maximum extent practicable, such program aides shall be hired from the indigenous target population.


1977
The Food and Agriculture Act 1977, Section 1425, of the National Agricultural Research, Extension and Teaching Policy Act 1977 (7 U.S.C. 3175): (b) In order to enable low-income individuals and families to engage in nutritionally sound food purchasing and preparation practices, the expanded food and nutrition education program presently conducted under section 3(d) of the Act of May 8, 1914 (38 Stat. 373, as amended: 7 U.S.C. 343 (d)), shall be expanded to provide for the employment and training of professional and paraprofessional aides to engage in direct nutrition education of low-income families and in other appropriate nutrition education programs. Public Law 95-113.

1970
In July 1969 (FY 1970) the EFNEP program was funded, with an appropriation of $30 million, under the Smith-Lever Act as 3(d) funding. (Smith Lever Act-U.S.C. 341-348). Public Law 91-127.


1968
EFNEP was initiated by USDA with $10 million, from Sec. 32 of An Act to Amend the Agricultural Adjustment Act, and for Other Purposes, August 1933, Chapter 641, 74th Congress 1st sess., 49 Stat. 750 744.

ACKNOWLEDGMENTS: NATIONAL EFNEP POLICY TASK FORCE

Special thanks go to the EFNEP National Policy Task Force for providing the substantive content for this document. Their work, which was completed between 2008 and 2011, has also been incorporated into other EFNEP policy and procedural documents and systems; examples being the 5-Year Plan, the Annual Update process, and the recently-released Web-based Nutrition Education and Evaluation Reporting System (WebNEERS).

EFNEP National Policy Task Force Members:

Janie Burney, University of Tennessee
Missy Cody, Georgia State University
Elaine Fries, Texas A&M University
Lisa Jordan, University of Georgia
Julie Gray, Purdue University
Judy Midkiff, Virginia Tech
Carolyn Nobles, Prairie View University
Mary Jane Willis, Rutgers, The State University of New Jersey
Helen Chipman, NIFA
The U.S. Department of Agriculture (USDA) prohibits discrimination against its customers, employees, and applicants for employment on the bases of race, color, national origin, age, disability, sex, gender identity, religion, reprisal, and where applicable, political beliefs, marital status, familial or parental status, sexual orientation, or all or part of an individual’s income is derived from any public assistance program, or protected genetic information in employment or in any program or activity conducted or funded by the Department. (Not all prohibited bases will apply to all programs and/or employment activities.)

If you wish to file an employment complaint, you must contact your agency’s EEO Counselor within 45 days of the date of the alleged discriminatory act, event, or in the case of a personnel action. Additional information can be found online at http://www.ascr.usda.gov/complaint_filing_file.html.

If you wish to file a Civil Rights program complaint of discrimination, complete the USDA Program Discrimination Complaint Form, found online at http://www.ascr.usda.gov/complaint_filing_cust.html, or at any USDA office, or call (866) 632-9992 to request the form. You may also write a letter containing all of the information requested in the form. Send your completed complaint form or letter to us by mail at U.S. Department of Agriculture, Director, Office of Adjudication, 1400 Independence Avenue SW, Washington, D.C. 20250-9410, by fax (202) 690-7442 or email at program.intake@usda.gov.

Individuals who are deaf, hard of hearing or have speech disabilities and you wish to file either an EEO or program complaint please contact USDA through the Federal Relay Service at (800) 877-8339 or (800) 845-6136 (in Spanish).

Persons with disabilities who wish to file a program complaint, please see information above on how to contact us by mail directly or by email. If you require alternative means of communication for program information (e.g., Braille, large print, audiotape, etc.) please contact USDA’s TARGET Center at (202) 720-2600 (voice and TDD).

Updated November 2021