

texas

WIC

news

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VENA
Is Here

Texas WIC

▶▶ The Electronic Funds Transfer Association (EFTA) presented the Department of State Health Services and the WIC Electronic Benefits Transfer staff with an award for the Texas Electronic Benefits Program at a conference held in Washington, D.C., last November.

EBT replaces paper vouchers with Smart Card technology, an electronically recorded card that works similarly to a debit card. Approximately 40 percent of the state (geographically) has been converted to EBT and plans are underway for a complete Texas integration.

We pioneered much of the technical implementation and established the national standards necessary for the electronic technology, which involves the grocery industry, state agencies, the federal government and the electronic fund transfer associations who play a key role in electronic commerce.

Bob Bucceri, chairperson emeritus of the EBT Industry Council and senior consultant to the Electronic Funds Transfer Association, explained why Texas deserved this award.

“A long time ago Texas chose an innovative business model for making WIC EBT cost-efficient and they proved that this model

worked for their state rollout,” Bucceri said. “This award is a prestigious one that Texas WIC shared with the New Mexico Health Department for their work in the EBT area.” It was rewarding for EFTA to recognize our contributions and success in a national setting; and it was especially an honor for Texas WIC to be in the same category of past winning projects such as Louisiana’s health department for their work during Hurricane Katrina.

This recognition is important. It’s an extraordinary accomplishment that revolutionizes the way we deliver food benefits to WIC clients. This gets the best benefits to the clients in an efficient and timely manner, and that’s what really matters.

EBT Program Earns National Recognition



From the Texas WIC Director - Mike Montgomery



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Changes to Dietary Risk Criteria Affect Participant Forms

by Isabel Clark, M.A., R.D.
Clinical Nutrition Specialist

Beginning October 1, 2007 Texas WIC will implement FNS Policy Memorandum 98-9, Revision 8, Nutrition Risk Criteria. This implementation revises and consolidates the current 18 Texas WIC dietary risk criteria to only five risks:

1. Failure to Meet Dietary Guidelines for Americans,
2. Inappropriate Nutrition Practices for Infants,

3. Inappropriate Nutrition Practices for Children,
4. Inappropriate Nutrition Practices for Women, and
5. Dietary Risk Associated with Complementary Feeding Practices.

The most dramatic change is the inclusion of the allowable nutrition risk *Failure to Meet Dietary Guidelines for Americans*, and is based on **presumptive** risk.

This new criterion applies only to women and children older than two and is the result of two significant findings from the 2002 Institute of Medicine's Report *Dietary Risk Assessment* in the WIC Program:

1. Nearly all low-income women in the childbearing years and children ages 2 to 5 years usually consume fewer than the recommended number of servings specified by the Food Guide Pyramid and, therefore

“... allows WIC staff to focus on this vulnerable group and assist caregivers in making appropriate feeding decisions for their infants and young children related to the nutritional needs and developmental stage of this age group.”

To ensure that all WIC applicants and participants receive a thorough assessment, this risk may only be assigned after a complete nutrition assessment has been performed including growth, biochemical, health/medical, and diet, and no other risks have been identified.

What will take the place of the 24-hour diet recall and the diet questions previously asked on the Diet Assessment Form?

A complete diet assessment will be performed when assessing for Inappropriate Nutrition Practices. This risk criterion is category specific and consolidates previous dietary risk criteria that applied to infants, children, or women. Texas WIC is taking this opportunity to implement the new Value Enhanced Nutrition Assessment (VENA) philosophy at the same time we implement the revised diet criteria. Rather than collecting diet intake information and asking specific questions to identify each and every dietary risk, a conversation will occur to identify potential dietary risks. But more important, it will also serve to bring out the concerns and questions our participants have specific to their immediate needs and allow WIC staff to provide more meaningful and valued education to our participants.

Dietary Risk Associated with Complementary Feeding Practices is a new criterion for infants 4 to 12 months and children 12 to 24 months. This risk was added as a predisposing risk due to the fact that inappropriate complementary feeding practices are common and well documented in this population. Also, there are no nationally accepted dietary guidelines for children under the age of two. WIC plays a key role

in the prevention of nutrition-related health problems, but also in the promotion of lifelong healthy eating behaviors. This criterion allows WIC staff to focus on this vulnerable group and assist caregivers in making appropriate feeding decisions for their infants and young children related to the nutritional needs and developmental stage of this age group. A complete nutrition assessment must be completed prior to assigning this risk, similar to *Failure to Meet Dietary Guidelines for Americans*, including Inappropriate Nutrition Practices for Infants or Children.

Other changes of note include:

- 152, Low Head Circumference – A correction to FNS Policy Memorandum 98-9, Revision 7, April 2004 – This criterion applies to the infant category only and has been deleted for children 12 to 24 months.
- 420, Excessive Caffeine Intake – This is no longer an allowed criterion. A recent scientific literature review was unable to confirm that caffeine transferred into breast milk would have a deleterious effect on the breastfed infant.
- 422, Inadequate Diet – This criterion has been deleted as it is no longer necessary as a result of the revision of the dietary risk criteria and the inclusion of the IOM recommended presumptive dietary risk criterion.

Ongoing IDL trainings will be available to provide more information and guidance in implementing the new dietary criteria. The Texas WIC program looks upon these changes as an opportunity to enhance the services we provide and to make each visit to the WIC clinic a valued and meaningful experience for all participants.

would be at dietary risk based on the WIC nutrition risk criterion *Failure To Meet Dietary Guidelines for Americans*.

2. IOM also concluded that all dietary assessment methods are not adequate to precisely identify an applicant's eligibility status using criteria based on the Food Guide Pyramid or on dietary intake. Note: This criterion will apply only to women and children older than two.



Bouncing Back & Moving Forward

How to Become More Resilient

by Jennifer Krueger, M.A., M.Ed.
Content Specialist
Department of Kinesiology and Health Education
The University of Texas at Austin

When things in your life go wrong, do you bounce back or trip up? People with resilience use their inner strength to rebound from setbacks and challenges, whether from illness, increased workload, or the death of a loved one. Think of a rubber band stretched so far, you're sure it'll break; yet when you let go, it snaps back into place. That's resilience — the ability to bounce back in the face of adversity and move forward with strength, confidence, and perspective.

Fortunately, resilience is in each of us. Though some people seem more resilient than others, ALL of us have the ability to build emotional strength. Resilience allows us to view challenges in our lives as possibilities for personal growth.

People who are less resilient may focus on their problems, feel like victims, become overwhelmed, and rely on unhealthy coping behaviors, like increased alcohol use, overeating, and a reliance on drugs. They may be more likely to develop mental health problems such as ongoing anxiety and depression.

Resilience isn't about being tough or ignoring your emotions. It doesn't mean you are not supposed to feel frustrated when trying to work in an environment filled with crying babies, or angry when a client keeps you waiting. Resilience also doesn't mean that you should act cold or unfeeling, or discourage others from helping you. One of the key qualities of resilience is the ability to use support from others as a way to heal and grow.

What exactly is resilience?

Resilience is the ability to adapt to stress, adversity, or tragedy. It means you remain stable even when things around you feel unstable. People with resilience are able to say, "Okay, this bad thing has happened to me. I can focus on it, and feel terrible and helpless, or I can learn from it."

Resilience isn't a "quick fix" for your problems. But, being resilient can help you gain perspective, so you can enjoy your life instead of feeling overwhelmed by it.

Improving your resilience

Don't be concerned if you answered "1" or "2" to many of the questions below. It's never too late to increase your resilience!

The American Psychological Association suggest the following ten strategies for developing resilience. An online interactive exercise for building resilience is available at www.helping.apa.org. You can also get their free brochure by calling (800) 964-2000.

1. Make connections. Good relationships with close family members, friends or others are important. Accept help and support from those who care about you. Assisting others in their time of need can also benefit the helper.

2. Avoid seeing crises as impossible problems. Try looking beyond the present to how future circumstances may be a little better. Note any subtle ways in which you might already feel better as you deal with difficult situations.

3. Accept that change is a part of living. Accepting circumstances that cannot be changed can help you focus on circumstances that you can alter.

4. Move toward your goals and keep them realistic. Do something regularly that enables you to move toward your goals — even if it seems like a small accomplishment.

5. Take decisive actions. Take action in difficult situations instead of wishing they would just go away.

6. Look for opportunities for self-discovery. People often learn something about themselves and find that they experience positive growth during periods of challenge.

7. Nurture a positive view of yourself. Developing confidence in your ability to solve problems and trusting your instincts helps build resilience.

8. Keep things in perspective. Even when facing painful events, try to look at the "big picture." Avoid blowing the event out of proportion.

9. Maintain a hopeful outlook. Expect that good things will happen in your life. Try visualizing what you want rather than worrying about what you fear.

10. Take care of yourself. Pay attention to your own needs and feelings. Engage in activities that you enjoy and find relaxing.

Add these strategies to your resilience toolkit and you'll be better prepared to bounce back from a setback, and may become stronger and more capable than you were before!

Rate your Resilience!

People with resilience possess certain qualities. To get an idea of how resilient you are, rate yourself on these qualities, using this scale:

- 0 = Not true
- 1 = Sometimes true
- 2 = Mostly true
- 3 = Always true

Qualities of resilient people

- I bounce back after a setback or illness.
- I feel in control of my life.
- I have close, supportive relationships
- I'm optimistic and hopeful.
- I don't give up even when challenged.
- I think clearly and logically under pressure.
- I can adapt to change easily.
- I know where and how to look for help.
- I can laugh, even when under stress.
- I believe in myself and feel strong.
- I would rather feel challenged than bored.
- I can handle uncertainty or unpleasant feelings.

This isn't a test that you pass or fail. It's simply a way of seeing what is in your "resilience toolkit." The higher your score, the more resilient you are!

OAG & WIC



Working Together for Texas Families

by Noelita L. Lugo
Project Specialist, Division for Families and Children
Office of the Attorney General of Texas



The Office of the Attorney General establishes, collects and enforces child and medical support court orders. Children and families need and deserve financial support, and in fiscal year 2006, the OAG's Child Support Division (CSD) broke records by collecting more than \$2 billion in child support. As part of the OAG's commitment to valuing Texas families and building on the firm foundation of CSD's successes, the Office of Family Initiatives (OFI) was created to perform alongside CSD.

What is OFI?

OFI works to strengthen families, promote cooperative parenting, increase parental involvement and encourage responsible fatherhood and healthy marriage.

OFI develops and manages special initiatives and long-term programs that work to improve outcomes for Texas families. Whether it's non-custodial parents (NCPs) who are being denied access to their children; unmarried, new parents who are wondering about paternity establishment or their future as a



“... when dads spend time with their children from the beginning and work to keep close feelings between them, good things happen.”

family; incarcerated NCPs who didn't think they needed to be dealing with child support while in prison; or a young man who has a baby on the way and doesn't know what to expect or what he should do; our agency is responding with services and resources to meet the needs of families.

OAG and WIC: Working Together for Texas Families

The impact on Texas families, children and communities is greater when agencies and organizations work together to help families grow strong and healthy.

“Alone WIC provides important services and benefits, but WIC expands its reach many fold when we help our participants find other programs and services to meet their needs. It is all part of Growing Healthy Families.”

– Mike Montgomery, Texas WIC Director.

From the January/February 2007 edition of Texas WIC News

WIC helps families navigate through various public assistance and health-related programs by providing its clients with materials from

and referrals to agencies and organizations that meet the needs of WIC participants. The OAG and OFI support WIC in its effort to help Texas families grow healthy and strong. That is why we are committed to providing parent education, responsible fatherhood, and healthy marriage, healthy family resource materials and information to WIC. The materials have been developed for use in OFI initiatives and programs, but they are equally relevant and useful in the work that WIC does with parents. After all, good health is not just about how we feed our bodies but also about how we feed our minds.

Women, Infants and ...Dad?

In addition to providing resource materials, OFI is working with WIC to provide training on how to improve families' nutritional health and child well-being by involving fathers and encouraging responsible fatherhood. The training will spotlight the role fathers play in their child's life. It also will present information on why it is important to work with both parents, and how to engage fathers in family services for better family outcomes.

(continued on next page)

OAG and WIC

(continued from page 9)

Research has shown that when dads spend time with their children from the beginning and work to keep close feelings between them, good things happen.

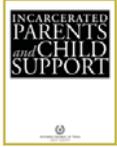
In a recent OFI survey of WIC local agency liaisons:

- 77 percent of the respondents agreed that “it would benefit (WIC participants) if (WIC) had more information or training on” cooperative parenting techniques, father involvement (responsible fatherhood), improving nutritional health of families through educational outreach to fathers, and domestic violence issues.
- 80 percent of the respondents said they were “interested in learning more about or receiving” one or more of the parenting and family strengthening education and resource materials produced by OFI.

Cultivating a collaborative relationship between WIC and the OAG will equip agency employees with more tools to use when working with parents. Subsequently, it will heighten the level of customer service provided and improve outcomes for Texas families.

Take the OFI challenge. Can you get all five right?	
1. Which of the following has the greatest impact on whether a pregnant woman gets adequate and early prenatal care?	
A) Education	C) Support of her partner
B) Support of her mother	D) Income
2. Which of the following is the most significant predictor of smoking relapse among pregnant women?	
A) Socio-economic status	C) Prenatal care participation
B) Partner smoking	D) Education level
3. Infant mortality rates are how much higher for children without a father’s name on their birth certificate than those with dad’s name?	
A) No difference	C) 2X
B) 1.6X	D) 2.3X
4. Which of the following can increase the likelihood of a mother breastfeeding by almost 100%?	
A) Her attending a class on breastfeeding	
B) Her mother attending a class on breastfeeding	
C) Her partner attending a class on breastfeeding	
5. Children are significantly less likely to be obese when _____ use nutrition labels to determine ingredients, nutrient amounts, and serving sizes.	
A) Mothers	C) Grandmothers
B) Fathers	D) Any of the above
Answers: 1 C 2 B 3 D 4 C 5 B	

You can view, download and print these OAG materials in English or Spanish by visiting http://www.oag.state.tx.us/newspubs/publications_cs.shtml#ofi

	<p style="text-align: center;">PUBLICATIONS</p> <p>Maps for Dads A guide for new dads on what to expect when baby arrives and how to take care of their new baby.</p>
	<p>Parenting Two-gether™ Includes useful tips, techniques, activities, and online resources regarding basic baby care, paternity establishment, responsible fatherhood, and healthy relationships and marriage.</p> <p>*Will soon be available in Spanish.</p>
	<p>Handbook for Non-custodial Parents Explains the Texas child support system and highlights the legal processes involved in paternity establishment and child support enforcement.</p>
	<p>For Our Children: Learning to Work Together, A Co-Parenting Guide Explains the concept of and provides tips on how to “co-parent.” The guide can be used by parents who have never been married, who are separated or divorced.</p>
	<p>Incarcerated Parents and Child Support Filled with information for those parents who are incarcerated or recently released from incarceration, but who want to get back on track with paying child support and being involved in their child’s life.</p>
VIDEOS or DVDs	
<p>For Our Children: Learning to Work Together, A Co-Parenting Video</p> <p>Incarcerated Parents and Child Support video</p> <p>Both of these videos complement the information provided in their corresponding guide or pamphlet.</p>	
<p>This seven page packet of information was developed to help parents:</p> <div style="display: flex; align-items: center;"> <div style="text-align: center;">  <p>ATTORNEY GENERAL OF TEXAS GREG ABBOTT DIVISION FOR FAMILIES AND CHILDREN</p> <p>Paternity Information</p> </div> <div style="margin-left: 20px;"> <p>Understand why it’s important to establish paternity, get their questions answered about establishing paternity, understand that paternity establishment has benefits for mom, dad and child, and obtain information on how to access child support services.</p> </div> </div>	
<p>You also can download and print a publication order form online at: www.oag.state.tx.us/AG_Publications/pdfs/pub_orderform.pdf</p> <p>Note: Publications are printed in limited quantities. The Office of the Attorney General reserves the right to fill publication orders based on availability. Please allow a minimum of two weeks for delivery.</p>	

WIC Wellness Works

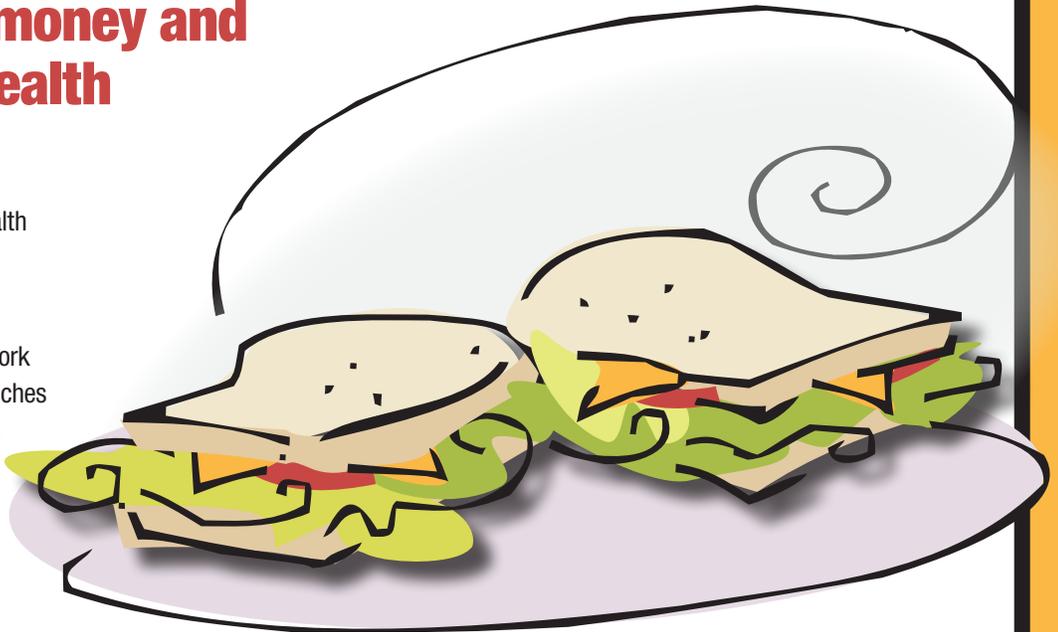
Save time and money and improve your health

QUESTION:

What can you do to improve your health while also saving time and money?

ANSWER:

Bring a healthy brown bag meal to work instead of eating out! Homemade lunches are less expensive, generally lower in calories than restaurant foods and can take less time (no driving or waiting to place your order). Use the extra free time during lunch to run errands or get in a quick walk!



If you are not ready to go cold turkey — pack your lunch just two days a week. Try the tips below to get started.

GENERAL TIPS:

- Use reusable containers for your food; they are less expensive than plastic bags.
- Store your lunch in your clinic refrigerator to maintain proper, safe temperature and keep food from spoiling.
- Bring condiments in small, portion-sized containers so you will use less.
- Gather lunch items the night before to make the morning rush less stressful.
- Leftovers from the previous evening meal make a yummy, economical lunch!
- Bring a water bottle to drink during your meal. Saves calories!

APPETIZING LUNCH CHOICES:

- For sandwiches, choose lean meats (labeled 95% fat-free, low sodium), such as roast beef, turkey, chicken or ham.
- Use a variety of lettuce, like green or red leaf, romaine, spinach, or even bean sprouts on sandwiches.
- Use a variety of healthy breads – whole wheat, whole grain, rye or pumpernickel.
- Spice up your sandwiches with fresh herbs, like basil, dill, and parsley.
- Pick up a roasted chicken and pack a small lunch portion.
- Pack a box of raisins or make your own blend of dried fruits with apple rings, banana chips and dried apricots.
- Try new condiments on your sandwiches such as sun-dried tomato spread, horseradish, Chinese mustard, spreadable goat cheese or Caesar salad dressing.
- Pack a small portion of lower calorie crunchy options such as pretzels, baked potato chips, reduced-fat crackers or reduced-fat cookies.
- Add fresh vegetables for crunch. Cut up carrots, peppers, cucumbers and broccoli, and bring a low-calorie dip to add some zip.
- Bring fresh fruit, low-fat yogurt or low-fat cottage cheese, high fiber crackers, a few nuts and a bottle of water to round out your sandwich entrée.



Weekly Lunch Plan:

MONDAY

CHICKEN BREAST SANDWICH:

- 2 slices (2-3 oz) chicken breast, skinless
- 2 slices whole wheat bread
- 1 slice (¼ oz) cheddar cheese, reduced-fat
- 1 large leaf romaine lettuce
- 2 slices tomato
- 1 Tbsp mayonnaise, low-fat

1 CUP CANTALOUPE

1 CUP APPLE JUICE

TUESDAY

SPINACH SALAD:

- 3 cups of fresh spinach leaves
- ½ sliced pear
- ½ cup mandarin orange sections
- 2 Tbsp unsalted peanuts
- 1-2 Tbsp reduced-fat red wine vinaigrette

12 REDUCED-SODIUM WHEAT CRACKERS

1 CUP FAT-FREE MILK

WEDNESDAY

TUNA SALAD SANDWICH:

- 4-5 Tbsp tuna salad:
 - 1 can tuna, packed in water
 - 1 apple, cored and chopped
 - ¼ cup chopped celery
 - 3 Tbsp reduced-fat mayonnaise
- 2 slices whole wheat bread

CUCUMBER TOMATO SALAD:

- ½ cup fresh cucumber slices
- ½ cup tomato wedges
- 1 Tbsp sunflower seeds
- 1 tsp Italian dressing, reduced-calorie

½ CUP FRUIT COCKTAIL, JUICE PACK

THURSDAY

HAM AND CHEESE SANDWICH:

- 2 oz ham, low-fat, low-sodium
- 1 slice (¼ oz) cheddar cheese, reduced-fat
- 2 slices whole wheat bread
- 1 large leaf romaine lettuce
- 2 slices tomato
- 1 Tbsp mayonnaise, low-fat

1 CARROT STICK

FRIDAY

TURKEY VEGGIE WRAP:

- 2 oz turkey breast, cooked & coarsely chopped
- 1 large whole wheat tortilla
- 2 Tbsp fresh corn kernels
- 2 Tbsp chopped red bell pepper
- 1 large leaf romaine lettuce, torn into pieces
- 1 Tbsp thinly sliced green onion
- ½ Tbsp light ranch dressing

1 CUP STEAMED BROCCOLI, COOKED FROM FROZEN

1 MEDIUM ORANGE



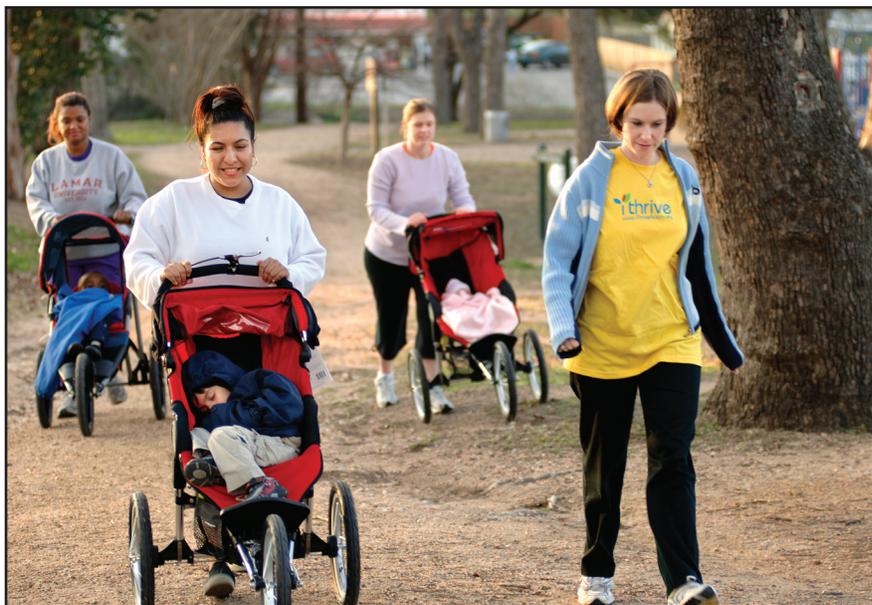


Walk with WIC: How one agency is not only “TALKING THE TALK” BUT “WALKING THE WALK”

“Wouldn't it be great if we could find a way to make it easier for our clients to be physically active?” asked Brandey Ackerman, R.D., L.D., nutrition education coordinator at LA 01. In conversations with staff, WIC clients said barriers to walking include the need for strollers, good walking shoes, and supportive walking partners. This led to the creation of **Walk with WIC**, a walking program for WIC clients and community members in Austin, Texas.

“The purpose of the walking program is to increase access and opportunities for physical activity,” Ackerman said. “The program provides a safe and encouraging environment, strollers for children, and chances to walk with people outside of scheduled WIC walks.”

LA 01 began **Walk with WIC** in 2006 with funding and program support from two community programs. The initial 10-week walking program was piloted at three Austin WIC clinics with 31 participants. Participants were asked to commit to at least one walk a



Brandey Ackerman, R.D., L.D. (right)

week as well complete a release form and a short survey. Participants received incentive items such as water bottles, towels, and tee shirts for each week they completed at least one walk. A program sponsor donated new athletic shoes for participants who complete 10 walks within the 10-week period.

The WIC staff used grant money to buy strollers for clients to use to walk during the 10-week program. “We use a checkout system similar to our breast pump checkout,” Donna Sundstrom, LA 01 Agency Director said. “We write our phone number on the strollers and tag them with green luggage tags. We haven't had any problems with clients returning the strollers

– it's worked out great!” While only WIC clients can check out the strollers, **Walk with WIC** is open to everyone in the community. “One of our WIC clinics is located next to a senior center and on days when the weather is good, several of the seniors walk with us,” Ackerman said.

So how does this program link to the WIC Wellness Works program? “Our staff lead the 30-minute walks,” she said. “All of our staff can lead a 30 minute walk each week. The clients like getting a chance to talk to us outside of WIC – they ask us about our lives and our families. It's a lot of fun and it's a great way for us to get to know our clients while getting to walk as well.”

(continued on page 4)



SITTING DOWN ON-THE-JOB (from acefitness.org)



SITTING IS OFTEN THE GREATEST CAUSE OF BACK PAIN. WHEN SITTING, TRY THE FOLLOWING:

- Use a rolled towel or small pillow for back support. Remove this low back support every half hour for five minutes to give your lower back a change of position.
- Your head should be positioned so your ear is in a line with your shoulder and your chin is parallel with the floor.
- Avoid leaning to one side when you are sitting, and avoid overstuffed furniture.

IT DOES NOT OFFER ADEQUATE SUPPORT.

- When working at a desk, your chair should be pulled close to the desk. An office chair with short armrests will allow this.
- Use a swivel chair to enable you to work without twisting your back.
- Place objects such as adding machines and computers as close to you as possible to minimize twisting and turning.

WIC WELLNESS WORKS WANTS YOU!

Join over 1,500 Texas WIC employees and over 200 Texas WIC clinics in WIC Wellness Works. It's free, it's fun, and it's good for you.

To get started contact:
Shellie Shores
shellie.shores@dshs.state.tx.us
512.458.7111 ext. 3463

Walking the Walk...

(continued from page 3)

It allows the staff to be physically active during the workday while being role models at the same time.

The program recently expanded to four Austin WIC clinics. "This year we received one of the WIC obesity grants," said Sundstrom. "It allows us to do even more with the program."

When asked what's best about the program, both Sundstrom and Ackeman say that it's watching their

clients build social networks to increase their physical activity. "Many of these women do not leave their homes during the day," said Ackerman. "Now they are meeting women in their neighborhood who they can walk with outside of the **Walk with WIC** program. I hope that one day there will be neighborhood walking groups all over the community that started at WIC; that's my vision."

Undersecretary Nancy Montanez Johner Visits Collin County WIC Clinic

by Shirley Ellis, M.S., R.D.
Clinical Services Program Coordinator

On April 25, 2007, Nancy Montanez Johner, the USDA undersecretary for Food, Nutrition and Consumer Services, visited the Collin County Health Care Services WIC clinic in Plano, Texas. Several Dallas USDA staff members escorted Undersecretary Johner to the clinic. At the clinic, the undersecretary met

Port Arthur Celebrates National Nutrition Month

by Rose Quirante, M.S., R.D., L.D.

The City of Port Arthur Department of Health WIC Local Agency 30 celebrated National Nutrition Month on March 9, 2007.

This year the children set up healthy snacks — their choice, either apple slices with peanut butter or snack kabobs made from straight



Kaitlyn Tran (4) creates a snack kabob.

pretzels, green and red grapes, and cubed cheese. All who joined in received a red apple eraser as a prize.

As in previous years, WIC foods were used to prepare a vegetarian two-bean chili served with steaming rice, low-fat cheese and crackers, deviled eggs,

low-fat peanut butter and crackers, and orange-pineapple punch. Clients enjoyed the chili meal and received copies of the recipe.

Brochures on *Eating Smart Staying Healthy* and *25 Healthy Snacks for Kids* were also shared. The video *Get Active with Zowzoo* was played repetitively in the waiting area to help encourage children to be physically active.

Celebrating National Nutrition Month every year strengthens the path to healthy eating and increases physical activity among our children.

with assistant commissioner for Family and Community Health Services, Evelyn Delgado, Nutrition Services director, Mike Montgomery, and other state agency and local agency staff. Ms.

Johner visited with WIC participants and observed the Electronic Benefit Transfer (EBT) loading of WIC benefits onto the WIC Lone Star Card. Collin County interim WIC director, Barbara Beal, shared with Ms. Johner examples of client materials including the *Jump for Joy* book, the *Zowzoo* video and take home lesson, the *To Baby with Love: Overcoming Breastfeeding Barriers* and *The Comfortable Latch: A Guide to Successful Breastfeeding* DVDs and take home lessons, and the WIC approved foods brochure. Ms. Johner was impressed with the quality of materials produced and provided by the Texas WIC program.

From the clinic, the undersecretary went to an EBT-certified grocery



Nancy Montanez Johner

store where she and a WIC participant both used EBT cards to shop for and buy WIC authorized foods. Ms. Johner used her shopping list and the WIC approved foods brochure to help determine what items she could purchase with her EBT card. A key part of the EBT exercise was to show the integration of EBT into the retail store, which allows the client to shop for both WIC and non-WIC foods at the same time without having to transact WIC foods separately. This saves time for the client and the store. The system worked perfectly and Ms. Johner was impressed with the ease of the entire process. Before leaving, the undersecretary thanked everyone for a successful event.

WIC Administrative Assistants Wear Many Hats

by Renee Mims, Editor
Publishing, Promotion and Media Services

▶▶ *Answering the phones, distributing the Texas WIC News, coordinating WIC publications, and handling travel requests are just a few of the many tasks the WIC administrative assistants handle on a daily basis. Meet the WIC administrative staff.*



Delores Preece

Delores Preece, administrative assistant for the nutrition education clinic services unit, supports 17 staff with many administrative responsibilities.

“I take care of everybody in the branch with memos, purchase requests, and travel arrangements,” Delores said. “I try to be as organized as possible so that I keep everybody looking good.”

Another role that Delores assumes, in addition to her WIC duties, is the emergency coordinator for second-floor Moreton. Her responsibilities include checking fire extinguishers, clearing exits, and making sure hallways and cubicles are clear in case of an emergency. Delores has been employed by the state for 14 years.

Grandmother of 4, Delores loves to garden. “I love to work in my flower beds,” she said. “I have three acres of land and one of those acres is for flowers.”



Carye Robinson

Information Response Management (IRM) administrative assistant Carye Robinson routes phone calls to appropriate contacts within WIC.

“Because I’m the first contact for the IRM group, I strive to provide quality customer service,” Carye said. “If I cannot assist the caller immediately, I will do my best to find who can help the caller.”

She also assists with mail outs to local agencies and conducts follow-up interviews with program participants to make sure complaints are resolved.

“My interaction with clinic level staff is by phone, fax, or email,” she said. “I ensure that calls from WIC local agency staff are routed to the appropriate IRM liaison or other staff within the Clinic Services Branch and Nutrition Services Section.”

Carye, who joined the IRM team in June, loves the outdoors and is “always up for a good garage sale or two.”

Kay Lin Mueller



Administrative assistant, Kay Lin Mueller, assists 14 nutritionists and other staff members in WIC Clinic Services. She edits and polishes memos sent to local agencies by mail and on the WIC web site. She also answers the main phone line at Howard Lane and assists staff with correspondence, faxes, travel vouchers, and timesheets.

“I really like working for WIC,” Kay Lin said. “I believe it’s a state program that really helps people. I also enjoy the interaction with staff here at the state office and the local agencies and clinics throughout Texas.”

Kay Lin, who has been with WIC for more than three years, has two grown children — Hudson, a member of a local Austin band, and Jane who is attending college in New York City. Kay Lin’s husband, Ken, works for Health and Human Services’ Data Integrity Section.



Hilda Tijerina

As publication coordinator, Hilda Tijerina assesses needs and schedules printing for the WIC program. She also gathers information for the WIC catalog (which lists all printed materials, videos and lessons) and answers questions about how to order from the catalog. "I've always wanted to work in a place that helps people," Hilda said. "I'm so proud to work for a program like WIC that provides resources for women, infants, and children."

Employed since 1988, Hilda garnered a top award from the State Employee Incentive Program for a suggestion that saved the WIC program almost \$18,000 per year. She accepted the award at the Governor's Award Ceremony in 2001.

"My customer service skills go beyond assisting customers," she said. "I have a passion for helping and working with people and if I am able to do something to help one person, then that's a good day."



Leticia Silva

Leticia (Lety) Silva helps distribute nutritional publications and videos in her role as administrative assistant in the Publishing, Promotion and Media Services (PPMS) branch of the Nutrition Services Unit.

She coordinates work requests, assigns project numbers, and revises addresses in the 2800+ database of subscribers for the Texas WIC News publication. Other clerical duties include processing and tracking purchase requests, travel requests, and vouchers. She also directs incoming calls throughout different departments of the agency.

With more than 14 years of service to the state, Lety practices what she's learned at the health department. "When I am not at the office I like to take care of myself by exercising daily and watch what I eat according to the food pyramid," Lety said. "I want to help my family make the same healthy choices to ensure a long and happy life."

Rita Guerrero



Rita Guerrero, executive assistant to Nutrition Services Director Mike Montgomery and Program Services and Operations Branch Manager Brenda Bardwell, has many duties.

She assists managers and staff to ensure smooth daily operations in the section. She also acts as a liaison between the section and the associate commissioner's office.

"I've been with the state more than 15 years, worked as an enforcer, legal secretary, administrative and executive assistant," Rita said. "Of all the positions I've held I love this one best."

Rita, a licensed cosmetologist, works part-time as a cosmetics guide. She loves spending time with her dog and her best friend and traveling to places she's never been. She is also a certified advanced open water scuba diver.

Mary Dell Heitkamp



Mary Dell Heitkamp, receptionist and administrative technician, is usually the first contact people have with WIC. Mary Dell's ability to discern the needs of those she helps is keen.

A state employee for 14 years, Mary Dell listens carefully and uses her intuition in determining people's needs. "I know it's hard to ask for assistance," she explains. "I try to assure that everyone feels welcome and comfortable when they call to inquire about becoming a WIC participant."

Mary Dell, mother of three — Troy, Amber and Kyle, lives in New Braunfels. She has one grandson, Jordan, who lives in Pennsylvania but spends the summers with her. She enjoys reading and watching movies, but most of all she enjoys spending time with her children. As she says, "After all, that's what it's all about."



Cultural Differences Affect Childhood Overweight and Obesity

by The University of Texas Nutrition Education Team*

Childhood overweight and obesity have been linked to parenting styles and beliefs. We know that children are born with internal signs of hunger and fullness, which helps control their calorie intake, and that parent attitudes and behaviors can make these signs stronger or weaker. For example, when a parent tries to limit what their child eats, the child is more likely to overeat and be overweight. At the same time, a child with parents who push him to eat will also eat more calories.

Since choices about what and how to feed children are made within a cultural context, WIC and The University of Texas Nutrition Education team wanted to learn

if there are cultural differences in feeding practices and beliefs. UTNE looked at these issues in a recent pilot study of preschooler feeding among WIC clients. They found that Spanish-speaking parents reported different feeding practices and beliefs than English-speaking parents (Hispanics and non-Hispanics). Obtaining the language of a different country is part of “acculturation.”

“Acculturation” is a process in which members of one cultural group adopt the beliefs and behaviors of another cultural group. It is important in studies of ethnic groups in the United States. “Dietary acculturation” describes a decrease in the use of traditional foods, the use of traditional foods

in new ways, and more use of foods from the new country. For Mexican immigrants to the United States, this might mean replacing a traditional Mexican diet rich in beans, fruits and vegetables, and grains, with one that is made up of highly processed convenience foods and sugary sodas. Some research shows that when Hispanics in the United States, regardless of language spoken, become more acculturated; what they feed their children changes. The UTNE study measured “acculturation” by asking each participant what language is primarily spoken at home.

Study design

The UTNE study surveyed 235 adults with children enrolled in WIC clinics in Austin, Dallas, Harlingen, Houston, Midland, Jasper, San Antonio, and San Marcos. The survey participants were asked 32 questions about feeding behaviors and beliefs that might be related to childhood overweight. The survey also included demographic questions. UTNE offered the survey in both English and Spanish. About half of the participants completed the survey in Spanish and half in English.

Almost all of the clients surveyed were women. On average, they had participated in WIC for about three years. Nearly three quarters of the participants identified themselves as Hispanic; 17 percent as non-Hispanic white and 11 percent as non-Hispanic black. The average age of the participants was 28 years. UTNE scored nine feeding practices and beliefs, including:

- Worry about child’s weight status (both over- and underweight)
- Concern about child overeating
- Difficulty in child feeding
- Using food to calm child
- Pushing child to eat more

- Use of positive incentives to get child to eat
- Child's control of feeding
- Unstructured mealtimes
- Use of a bottle

UTNE compared average group scores among Spanish-speaking Hispanics and English-speaking Hispanics and non-Hispanics.

Spanish-speaking parents feed their children differently

UTNE found that the main differences in child feeding practices and beliefs were between Spanish-speaking parents and English-speaking parents (Hispanic and non-Hispanic).

- Compared to English-speaking parents, Spanish-speaking parents were more likely to be worried about their children's weight and concerned about their children overeating.
- Spanish-speaking parents more likely reported that they push their children to eat more and use incentives to encourage their children to eat.
- Spanish-speaking parents also were more likely to give their children a bottle during the day.
- Spanish-speaking parents said that they give their children more control over feeding. This has been shown in previous research to protect against overweight – as long as the foods offered are healthy.

UTNE did not find any significant differences in the English-speaking group between Hispanics and non-Hispanics or between whites and blacks. The results of the study have just been published in the *Journal of Family and Community Health*.

What nutrition educators can learn

- There is a cultural component to feeding children. Be aware of cultural norms when talking

about healthy behaviors.

- Hispanics are not all the same in their beliefs and practices and there should not be a one-size-fits-all approach to nutrition education. Acculturation may affect behaviors more strongly than ethnicity. Highly acculturated Hispanics may be more similar to non-Hispanics than to less acculturated Hispanics.
- Feeding practices that are not related to overweight in Mexico, such as pushing a child to eat more, may put children at risk for obesity in the American food environment, where low-cost foods are usually high in calories and low in nutrients. Encourage recent immigrants to hold on to dietary traditions that include fruits, vegetables, beans and grain, while adding little fat to foods like bread and potatoes and changing to reduced fat dairy products.

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Hello Everybody!

by Eaton Wright, B.S., NUT
Nutrition Expert

Eaton here to Test Your VENA I.Q. VENA was developed jointly by the USDA and the National WIC Association to:

- *improve nutrition services in the WIC Program by establishing standards for the assessment process, and*
- *personalize nutrition education, referrals, and food package tailoring.*



Quiz

1. True or False. VENA stands for Vegetarians Everywhere Need Awonderfulsaladeveryday!
2. The primary goal of the WIC nutrition assessment is:
 - a. To identify and document the participant's risks and needs in a prioritized manner so they can be addressed through nutrition services
 - b. To facilitate the continuity of care throughout subsequent WIC visits
 - c. a & b.
3. True or False. All women and children (ages 2 to 5 years) who meet the eligibility requirements of income, category, and residency status will be presumed to meet the requirement of nutritional risk.
4. Information necessary for a complete nutrition assessment include:
 - a. Anthropometric
 - b. Biochemical
 - c. Clinical
 - d. Dietary
 - e. Environmental
 - f. Family
 - g. Grades
 - h. All of the above
 - i. All of the above except g.



Answers

1. False. VENA stands for Value Enhanced Nutrition Assessment. But you don't have to be a vegetarian to enjoy a wonderful salad everyday!
2. The correct answer is C. Consider the 3E's when developing a constructive approach nutrition assessment. 1. Environment. A warm, friendly environment creates a sense of belonging. Feeling welcome can build a sense of trust and good rapport. 2. Engagement. Participants should understand the purpose, steps, and expectations of the nutrition assessment. The nutrition assessment should emphasize face-to-face interaction to allow feedback to flow smoothly between staff and participant. 3. Endpoint. The endpoint is the identification of risk conditions and creation of a plan for intervention. A participatory approach makes use of previously collected information to assess progress in subsequent certifications. This, in turn, helps to create a continuity of care.
3. It is true that all women and children (ages 2 to 5 years) who meet the eligibility requirements of income, category, and residency status will be presumed to meet the requirement of nutritional risk. However, the current use of other nutrition risk criteria for eligibility determination will remain largely unchanged. Information will continue to be collected for the identification of potentially serious nutrition risk factors, such as growth issues, iron deficiency, or predisposing medical conditions related to nutrition. This information will be used to provide individualize nutrition services and necessary referrals.
4. The correct answer is I. A complete nutrition assessment is as easy as A, B, C, D, E, and F! Once information from the assessment has been collected and synthesized, a plan may be created with the participant. Grades? No way! Eaton's high school grades are strictly off limits!

About the author: Eaton Wright is a certified NUT based in Austin, Texas.

2007 Texas WIC Dietetic Interns Share Their Experiences

It seems like we just introduced the 2007 WIC Dietetic Interns to you (in the March/April 2007 issue of the Texas WIC News) and now it's time to say goodbye. After completing an eight month internship, the interns and their families celebrated with a graduation ceremony in August. Here are their thoughts on the experience of being a WIC Dietetic Intern.



Daniel Aguilar

What was the best thing about your internship?
“... the opportunity to be exposed to many different areas of dietetics. I learned ... different approaches from many dietitians, from a proactive standpoint to medical nutrition therapies.”



Nancy Martinez

What was the best thing about your internship?
“The internship took me out of my comfort zone. It made me realize I was capable of doing so much more. I think if you really want to do something in life, with hard work and dedication, you can accomplish anything!”



Lisa Vrazel-Trant

How will your internship affect your plans after graduation?
“I plan on using the knowledge I gained through this internship to better assist the WIC clients with their diet and related health. I am now better equipped to serve my community's nutritional needs. From this internship, I am taking with me new ideas and concepts that I will definitely use in the WIC clinic as well as in a private practice in the future.”



Christine Lister

How will your internship affect your plans after graduation?
“... will allow me to acquire my goal of being a registered dietitian, which will in turn help me to help my WIC clients at a higher level. I will continue working as the supervisor at the San Benito WIC clinic in Cameron County and I will be able to counsel and implement nutrition intervention for those clients with high-risk needs. I will also be able to help those families who are not as fortunate as others by giving them the opportunity to have access to a registered dietitian.”



Angela Gil

What experience did you have, if any, during your internship that was unexpected (a surprise)?
“... working on my CNIP Project ... was able to create a product that will be used by both mothers and doctors. ... I was very proud of what I created. I discovered that I enjoyed resource development and marketing projects such as creating pamphlets and handouts.”



Venitha Rajaratnam

What was the best thing about your internship?
“The WIC dietetic internship was a valuable learning opportunity. The ... knowledge gained from being part of the team was second to none — whether it was working with the numerous dietitians from Children’s Medical Center of Dallas or the expertise of Belton ISD’s food service director. Implementing a community nutrition project was a big undertaking, but also a beneficial experience.”

Virna Rey

What was the best thing about your internship?
“... the exposure that we receive at every rotation. I was able to see things that I would never have seen at WIC alone and meet people in all areas of dietetics. One assignment ... was teaching the entire fifth grade class at a local elementary school. ... when I saw the excitement in the children ... wanting to answer my questions on nutrition, it made me feel that I was making a difference.”





next issue:

Mealtime is Family Time

Texas WIC News is now available on the Texas WIC Web site!
<http://www.dshs.state.tx.us/wichd/gi/wicnews.shtm>

For information about subscriptions to *Texas WIC News*, e-mail WICNewsSubscriptions@dshs.state.tx.us or call (512) 341-4400, ext. 2258.



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