

texas

November/December 2011

WIC

news

Volume 20, Number 6

A photograph of a smiling Black woman with short dark hair, wearing a pink t-shirt, holding a young Black baby. The baby is wearing a white t-shirt with the text 'MOTHERS MILK EVERY OUNCE' printed on it. They are at an outdoor community event with other people in the background.

Laying the Foundations for 2012

Laying the Foundations for 2012

This issue of *Texas WIC News* wraps up a calendar year full of successes in nutrition education and breastfeeding, exciting program developments, and important collaborations that have helped prepare Texas WIC for another great year in 2012.

On Page 4, get the lowdown on the 2011 NBF Conference, where local and state agency staff, presenters, and exhibitors came together to focus on the important research and best practices that will keep Texas WIC growing successfully in 2012 — and beyond.

This year, state and local staff have been working together to continue to create and offer innovative, effective client-centered nutrition education. Check out how LA 31 uses health fairs to keep nutrition education fun and efficient on page 11. Pages 12-13 detail how LA 7 is inspiring positive behavior change for both WIC staff and participants in the pilot project, “Power of Influence.” See “What’s New in NE” on page 18 for all the new WIC resources at your disposal next year, including some of the USDA’s latest educational tools for MyPlate (page 14). Texas WIC News also recognizes a local leader in nutrition education, as we spotlight Sandy Kuehl’s retirement and future adventures on page 19.

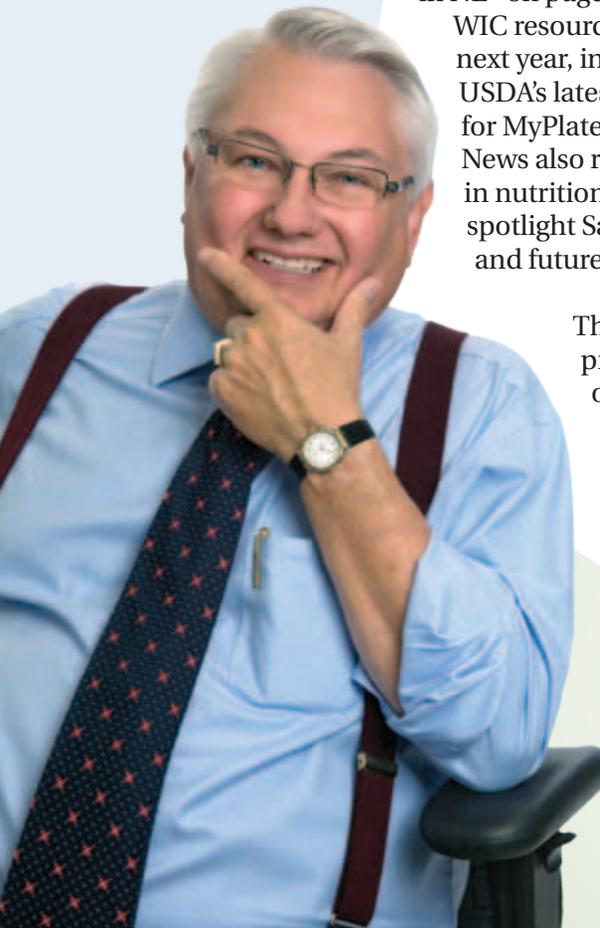
Thanks to the exceptional promotion and support of breastfeeding by Texas WIC staff in 2011, the USDA has awarded Texas WIC with a WIC Breastfeeding

Performance Bonus award of \$3.4 million for greatest improvement in breastfeeding rates! In addition to this outstanding achievement, breastfeeding staff continue to lay groundwork for further success in 2012, as Texas WIC works with hospitals to improve their maternity care practices. On pages 8-9, learn about the important strides the Texas Ten Step program has made to help make this happen. Read about all the resources this program provides for local staff to build relationships with their regional healthcare providers, and continue to promote breastfeeding as the best infant nutrition for our youngest participants — from birth on.

Supporting and growing with our WIC families before the earliest moments of life in the hospital can lead to improved health outcomes for all our clients. Read about a new theory called the “Life Course Perspective” that can change how we view maternal and child health on pages 16-17. In 2012, WIC and March of Dimes are putting this concept into practice by collaborating on several key initiatives, including “Prematurity Awareness Month,” which educates clients and staff about the importance of a full-term pregnancy.

Finally, on page 10, read how local WIC directors, state staff, and Catapult Systems have been joining forces all year to improve clinic services and client processing as we prepare for the future move to TXIN (Texas Integrated Network).

The accomplishments from WIC staff at all levels and in every department continue to pave the path to future successes in Texas WIC. I’m grateful and humbled by the important work we’ve all done together this year, and here’s to an even more collaborative and successful 2012!



From the Texas WIC Director
— Mike Montgomery



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Texas WIC News (USPS 016-975) is published bimonthly by the Department of State Health Services, P.O. Box 149347, Austin, Texas 78714-9347. Subscriptions are free. Periodicals postage paid at Austin, Texas.

POSTMASTER: Send address changes to WICNewsSubscriptions@dshs.state.tx.us or WIC News Subscriptions, Texas WIC News, Texas Department of State Health Services, P.O. Box 149347, Austin, TX 78714-9347.

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Department of State Health Services
Nutrition Services Section
P.O. Box 149347, Austin, TX 78714-9347
<http://www.dshs.state.tx.us/wichd/default.shtm>.

Comments may be sent to the managing editor at Publishing, Promotion, and Media Services, P.O. Box 149347, Austin, TX 78714-9347, or by e-mail to WICNewsEditor@dshs.state.tx.us.

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Growing with WIC: State Staff Shout-Out About 2011

by Liz Bruns, R.D., L.D.
Nutrition Training Specialist

The 2011 Annual WIC Nutrition and Breast-feeding (NBF) Conference was held June 21-23 at the Renaissance Hotel in Austin, Texas. Almost 700 people attended. That number includes over 600 WIC local agency and state staff, plus speakers and exhibitors.

Every local agency was represented. LA 1, Austin/Travis County had the most staff members in attendance: 54 total. A close second was LA 39 Northeast Texas Public Health District headquartered in Tyler, Texas. Thirty-five staff members from LA 39 traveled from northeast Texas to Austin to network, learn and enjoy.

There were many highlights. Below, state staff share personal highlights of the NBF conference.

Cathy Plyler on **Failure to Thrive (FTT) Guidelines for Identification and Treatment** by Cheryl Lair, R.D., L.D.

“The problem evaluating FTT is that there is no clear definition in the medical community. Cheryl commented that FTT is a symptom and not a diagnosis and the term ‘Pediatric under-nutrition’ is preferred over the term FTT. I strongly recommend reviewing the handouts for this session as they are informative and provide a good overview of the topic.”

Mary Van Eck on **Dietetic Internship Presentation**

“Linda Buck, TALWD President, presented scholarship awards of \$500 each to four of the current interns – Meredith Spencer, Cassie Holguin, Enrique Lira, and Meagan Williams. This is the first year TALWD has provided internship scholarships, and the Texas WIC Internship appreciates their support and generosity.”

Paula Kanter on **Tools for Helping Our Most Challenging Participants** by Amy Culp, R.D., L.D.

“Amy shared tips for assessing and counseling families of underweight and overweight children, and for those resistant to change. Ann Latham from LA 76, Outreach Health Services, mentioned to me that she was touched by Amy’s statement ‘Those we counsel that are high risk are those that are at risk of being hurt.’ When we are talking to moms we sometimes forget that ‘Little Ears’ are listening to what is being said and they may interpret that they are doing something bad or that they look bad. We need to remember that counseling for overweight children is family-focused.”

Shellie Shores on **Benefits of a Successful Food**



NBF Conference

1) Pre-conference session "Promotion of Exclusive Breastfeeding" presented by Dr. Heinig (shown on page 7); 2) The Art of Formula Approval presentation: Maricela Montoya, Sandra Brown, Cathy Plyler, Roxanne Robison, and Rachel Edwards; 3) Dietetic Internship presentation: Mary Van Eck, Enrique Lira, Meredith Spencer, Linda Buck, Cassie Shockey-Holguin, Meagan Williams; 4) Yvonne Vaughn, 5) Amy Culp, 6) Ruth Anne Thornton, 7) Roxanne Robison.

Bank Partnership by Yvonne Vaughn, Social Services Manager at San Antonio Food Bank (SAFB)

"The SAFB provides a number of services for WIC agencies including WIC application assistance, WIC appointment reminders, WIC outreach and promotion, and referral and application assistance to other helpful programs. If you would like to find out about food bank services in your area, contact the Texas Food Bank Network at <http://www.endhungernow.org>."

Liz Bruns on The Art of Formula Approval by Cathy Plyler and Roxanne Robison

"Handling complicated formula requests can be like juggling cups of coffee – messy and not that much fun! Cathy and Roxanne offered practical tips for simplifying the process using customer service skills targeted specifically for WIC staff dealing with clients and medical professionals. The presentation included videos of good and bad examples of customer service – filmed on location with an all-star cast. If you missed this presentation, look for the videos excerpts in upcoming customer service trainings."

Hildreth England on Improving Family Health

Through Family Involvement by Ruth Anne Thornton, M.P.A., Family Initiatives Program, Child Support Division, Attorney General's Office

"This was an engaging workshop where WIC staff learned why it's important to include fathers in WIC services as well as tools for engaging them in their families' health. Ruth Ann did a great job connecting the dots between the goals of WIC and the Family Initiatives program, pointing out that involving fathers in WIC nutrition and breastfeeding support can lead to healthier families, which in turn leads to more stable families. She led a discussion about current research on positive health and breastfeeding outcomes with engaged dads, identifying health issues that might be related to father involvement (or lack thereof), and how to make WIC services more father-friendly."

Janet Jones on Vitamin D Requirements During Pregnancy, Lactation and Early Infancy by Carol Wagner, M.D., Professor, MUSC Children's Hospital

"Dr. Wagner gave a stunning presentation from the comfort of a crowded airport terminal. I was very impressed at her determination to present the information to an eager room full of health professionals de-



spite being stranded in Houston by the first rain we had seen in months. She delivered her presentation remotely, with ease and grace, only having to pause once to explain to someone in the terminal that she was ‘giving a talk.’ She is the only researcher to my knowledge addressing vitamin D and lactation and the link between maternal and infant 25 (OH) vitamin D status. She has demonstrated the importance of evaluating maternal vitamin D status early as a deficiency can have serious health consequences not only for the mother but for the fetus as well.”

Debbie Lehman on Counseling Skills That Work by Molly Kellogg, R.D., L.C.S.W.

“Molly presented an insightful workshop to enhance nutrition counseling skills that create behavior change, which is our overall goal at WIC. Counselors should know that behavior change occurs when ‘we want it to, it matters, we know how, and we believe we can.’ Basic VENA skills were taught, and attendees practiced using open-ended questioning, affirming, reflecting, and summarizing. The workshop also covered techniques to deal with resistance to change, promoting choice and control, and eliciting change talk.”

Meghan Coffey on Power of Influence by Darlene Irwin, LA 7 Director and Cynthia Wachtler, R.D., L.D.

“Darlene and Cynthia presented an inspiring preview of The Power of Influence. The City of Dallas was asked to pilot The Power of Influence training provided by Pam McCarthy. The Power of Influence is based on six principles that allow us to guide participants to adopt new ideas, attitudes, and actions. Dallas WIC staff returned to their clinics energized with this new approach for connecting with and inspiring clients.

In no time, the testimonials were rolling in from staff reporting satisfied participants now influenced to make behavior changes.”

Hellen Sullivan on Treatment Options for Depressed Mothers by Kathleen Kendall-Tackett, Ph.D., I.B.C.L.C.

“The newest understanding of post-partum depression demonstrates that it may be related to inflammation and a depressed immune system. Two over-the-counter medications effective in the treatment of depression are DHA and EPA. When these are combined with light therapy and exercise, we may see a reduction in the need for prescription medications. However for some mothers, psychotherapy and prescription medication will be necessary. When breastfeeding is not going well we should also remember to evaluate the mother for any signs of depression. Mothers with sore nipples and other breastfeeding challenges are shown to have a higher rate of depression. When these issues are resolved the rates of depression also decrease.”

Erica Harris on Safe Sleep for Babies: A Community Training by Maria Pena, Women’s and Prenatal Health Coordinator

“Maria discussed a new training on safe sleep practices that was recently developed by DSHS in collaboration with the Department of Family and Protective Services (DFPS). Maria provided session attendees with a copy of the training manual and highlighted practical information and tools that providers can use when talking to parents about safe sleep. Key topics discussed include recommendations for setting up a safe sleeping environment for infants and ways to lower the risk of Sudden Infant Death Syndrome (SIDS).”

Veronica Hendrix on When and Why Do



1)Jill Jayne, 2)Kathleen Kendall-Tackett, 3)Barbara Wilson-Clay, 4)Maria Pena, 5)Molly Kellogg, 6)Melissa Gutierrez, 7)Darlene Irwin, 8)Melanie Susswein, 9)Jane Heinig, 10) Erica Harris.

We Supplement? By Barbara Wilson-Clay, I.B.C.L.C.

“This session was amazing. I was reminded of two really important factors regarding supplementing breastfeeding. Feedings, even if by bottle should be paced. An infant that is bottle-feeding should be fed at a pace that he would take at the breast. Also, when infants are supplemented, they should still take in an amount their stomach can hold. Newborn stomach capacity is so often overlooked when bottle-feeding and parents are not taught this valuable information. More importantly, they miss the connection it has to obesity-prevention.”

Tracy Erickson on Promotion of Exclusive Breastfeeding by Jane Heinig, Ph.D, I.B.C..LC.

“Dr. Heinig presented findings from a series of collaborative studies by California WIC and the University of California at Davis Human Lactation Center. The studies revealed that a substantial percentage of women were not meeting exclusive breastfeeding goals because they often misinterpreted their baby’s cues and body language, leading them to believe they had insufficient milk. Session attendees received an overview of the training given to California WIC staff which included recognizing the 6 infant states, identifying baby behaviors, and engagement/disengagement cues.”

Tonia Swartz on Creating Child-Friendly Clinics to Enhance Nutrition Education moderated by Erica Harris

“Erica and a guest panel of LA Directors and NE Coordinators discussed low-cost techniques to make WIC clinics more inviting and participant-friendly. Suggestions included painting walls with child-friendly themes, exchanging chairs for couches, showing kid-friendly movies in the waiting room, having local mascots visit the clinics,

and more. Because the kids are occupied, the parents are better able to focus on the nutrition messages, which makes everyone happier.”

Ann Sullivan, Contract R.D. on Encouraging Our Clients to Use Their Benefits by Melanie Susswein from Suma Orchard

“Through interviews and observations, Suma Orchard learned that even though WIC clients are appreciative of the benefits they receive through WIC, the shopping experience can be challenging, confusing, and embarrassing. Clients reported feeling unprepared to shop for WIC allowable foods, confused about Least Expensive Brand, and unsure how to calculate the cost of fruits and vegetables. Suma also learned that clients who were educated in an interactive fashion had better shopping experiences and redeemed more benefits. Some local agency staff shared their ideas and suggestions which included grocery store tours for new clients, “peer” shoppers, and store-specific information/displays for WIC participants.”

Tiffany Brown on A Rock ‘n Roll Approach to Communicating Your Healthy Message by Jill Jayne, M.S., R.D., Rock Star Nutritionist

“Jill is the country’s only broccoli-guitar-toting “Rock Star Nutritionist.” Her target audience is typically kids, who are more likely to tune-in to her interactive rockin’ nutrition-based messages than textbook factoids. She performed a fabulous Jump with Jill finale for the NBF conference! Her interactive presentation not only educates that eating breakfast, drinking more water and less soda, and increasing physical activity is COOL, it also helps kids increase retention of these important nutrition and health messages.”



Texas Ten Step Program: Year-End Wrap Up

by Veronica Hendrix, L.V.N., I.B.C.L.C., R.L.C.
Texas Ten Step Coordinator

The Texas Ten Step program (TTS) is committed to the health of Texas mothers and infants. It provides support to hospitals and assists them in their pursuit of the Baby-Friendly Hospital designation — the gold standard of care. The TTS program works with Texas hospitals and birthing centers, nurses, lactation consultants, midwives and physicians to encourage them to raise the standard of maternity care through breastfeeding support, policy making and continued education.

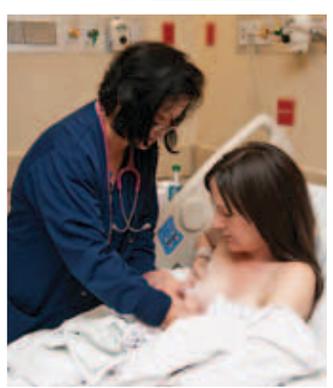
It has been an exciting year for the Texas Ten Step Program. The WIC State Agency hired a dedicated, full-time coordinator for the program in December 2010. With a full-time WIC staff member available, Texas hospitals and birth centers have seen an increase in TTS program support through email, phone calls and personal site visits to meet staff. Primary focus and attention is placed on bridging the gap between the hospitals and birthing centers and WIC, assistance with staff education through promotion of our State Breastfeeding courses, and relationship-building between WIC local agencies and hospital facilities through the promotion of the WIC Breastfeeding Peer Counselor program.

While the TTS program was developed in 1999, it is benefiting from the recent wave of national support and interest in breastfeeding, and facilities are exploring ways to change their maternity care practices to increase their breastfeeding rates. In December 2010, only 65 hospitals were enrolled in the TTS program. To help improve this number, the TTS coordina-

tor was tasked with contacting as many past TTS designees as possible to encourage them to reapply. Assistance was offered in evaluating their breastfeeding policies and many scheduled state training in their facilities to update their staff. Birthing centers have also been contacted to remind them of the change in program criteria that allowed them to apply and participate in the program. To date, the TTS program now has 75 of 267 hospitals and one birthing center listed as TTS facilities, with several waiting for designation.

The year progressed with on-site meetings between the TTS coordinator and Austin-area TTS facilities and staff, which provided a great opportunity to get feedback on the program, and help assess the needs of their facilities. At the WIC Nutrition and Breastfeeding Conference in Austin, local agencies' WIC staff expressed the desire to provide better resources and information to the hospitals. Many peer counselors expressed interest in reaching out to the hospital staff and administration to promote breastfeeding, WIC services and the Texas Ten Step program. The first ever Texas Ten Step World Breastfeeding Month (WBM) Challenge was developed in August to highlight TTS facilities, their staff, and practices with an emphasis on the State WBM theme, *Helping Moms Achieve Their Breastfeeding Goals*. Great participation revealed a true dedication of TTS staff to creative breastfeeding education.

Recognizing the need for increased awareness and collaboration between hospitals and WIC local agencies, a training for WIC staff was



developed and presented this summer called “Bridging the Gap - Using Marketing Principles to Promote Breastfeeding and WIC Services to Healthcare Professionals.” This training teaches basic marketing concepts like discovery, approach, closing and follow-up to better prepare the WIC staff when they are involved in breastfeeding promotion in their communities. It focused on 3 target groups — administration, physicians and nursing — and provided key information about how to approach these groups using professionalism and preparedness, while keeping in mind the background of each profession. Feedback following the training displayed a renewed enthusiasm for breastfeeding promotion, and many WIC and hospital staff expressed an interest in joining their local breastfeeding coalitions. Every opportunity was utilized to pass along current research articles which provided better lactation resources, and a TTS email list was generated to highlight “Best Practices” among Texas facilities.

Other TTS collaborative activities include plans to attend the Texas Association of OBGYN’s conference in Plano, the Texas Association of Family Practitioner conference in Dallas, and the Pediatric Society Conference in Sugar Land. This encourages the continued support of these professional organizations and education on the importance of reaching the Healthy People 2020 goals for infants of 82 percent ever breastfed, 61 percent at 6 months and 34 percent at 1 year. Another future progression will include development of the TTS Web page, www.texastenstep.org, where

downloadable print resources will be found for TTS hospitals to use in educating their staff and patients. Additionally, the program itself will be tweaked in the application and scoring process to better provide information on which hospitals are ready to make the transition to the Baby-Friendly Hospital designation. Finally, we anticipate rolling out the “Better by Breastfeeding” campaign which will target key stakeholders in breastfeeding promotion in the hospitals, encouraging them to evaluate their maternity care practices and breastfeeding initiation, duration and exclusivity rates. The Star Achiever Program, a second component of TTS, will award TTS hospitals in the Baby-Friendly Hospital Initiative (BFHI) pathway that are committed to increasing their BF rates to meet the Healthy People 2020 goals. This will be a competitive application process in which selected facilities will be provided with comprehensive education on the BFHI criteria.

The Texas Ten Step program is committed to improved overall maternity care for WIC clients, and has a vested interest in supporting the healthcare professionals that serve them. WIC is an invaluable resource to Texas hospitals and their staff, and the TTS program coordinator is working to make sure that Texas healthcare professionals provide the best maternity care through evidenced-based information, and that they understand that collaboration is critical. All women have the right to the BEST medical care for themselves and their infants, and increasing Texas breastfeeding rates is one of the best ways to give each infant an equal and healthy start in life.

Catapult to the Rescue

The Texas WIC Program, in existence for over 30 years, continues to grow and evolve. The increasing number of applicants applying for the program often creates processing challenges for clinic staff.

by Patti Fitch, R.D.
Branch Manager of Clinic Services

and Anita Ramos, R.D.
Clinic Services Training Specialist

A new computer system called Texas Integrated Network (TXIN) is scheduled to be implemented in a few years to assist with

the processing in an efficient fashion. These plans include a paperless certification process, an on-line application process initiated by consumers, and a broader approach to managing the education component — for both the participants and the staff. In the meantime, a company called Catapult Systems has been contracted to identify, plan and implement certain current technology to ease the overwhelming numbers of applicants being processed in the clinics.

Catapult Systems staff met with Texas WIC state staff and several local WIC Directors in April of this year and charged them with identifying problem areas that prevent staff from providing great customer service. The following items were identified as areas of need:

Scheduling System/Resource Management – a centralized scheduling system that allows participants to track and be notified of their WIC appointments by a wide variety of communication methods – email, texting, Twitter, etc. The system will also allow clinic staff to view and manage current, past and future appointments in a centralized system, and we envision that it will assist clinic managers as a resource tool to determine clinic staffing needs.

Growth Charts – the Growth XP software that automatically plots the weight and length/height is currently used by a portion of clinics. Efforts are currently underway to obtain smaller printers that are easier to place in the labs.

In addition, Version 2 of this software will also include prenatal weight gain grids, the WHO charts for children under two, and the WIC charts for 2 to 5 year olds. In addition, Catapult is going to obtain a central database for the growth charts so that access to the information is available at any worksite in the clinic.

Online Application Process – a tool to be used by participants and clinic staff to speed up the certification process. Participants will be able to fill out an application on the web. Through the use of web forms and the internet, the process will be more streamlined. The online system will also guide applicants through the required information needed to complete the application. The client may stop at any point in the process, save their information, and restart at a later time.

Medicaid Verification Application – a method for clinic staff to verify an applicant's participation with Medicaid, a gateway program, for WIC certification purposes. With client approval, staff will have the ability to obtain current status on Medicaid of applicant by either connecting to a verification site or by swiping the new "Your Texas Benefit" card and obtaining current status.

Centralized Database – a central view of the current Texas WIC state database. This will allow clinic staff to view information of all clients from a centralized source using data copied from the Texas WIN database. If implemented, the system would also provide clinic staff with the ability to view disqualified participants, perform dual participation research, and retrieve additional information.

The focus on obtaining the above capabilities is to provide some relief to clinic staff processes and in turn to improve clinic flow and customer service. This will allow staff to provide services in a more effective and efficient manner and focus more on the client. We are excited about partnering with Catapult Systems to bring new technology to our clinics in the near future.

Not Your Ordinary Holiday Gift List!

When no ordinary holiday gift will do, give the gift of wellness. Select a memorable gift that friends and family members will use and appreciate every time they eat, exercise, or relax. This just might be the gift that spurs them on to a healthier lifestyle.

Check out these healthy holiday favorites:



Healthy Eating

Stainless Steel Lunch Containers

Pack a healthy lunch in a better container which comes in 3 or 4 separate, stackable bowls for easy transport in a bag. Dump the plastic (which could contain possible BPA chemicals) and pack a healthy lunch in a healthy container.

Mini Food Processor

This highly useful kitchen tool is good for small tasks such as chopping herbs, grinding nuts and seeds, and dicing veggies. As a bonus, it's so small that it doesn't take up valuable counter space.

Herb Scissors

Why bother to chop herbs when you can simply CUT them? These multi-blade scissors are ideal for fresh herbs and preparing salads.

Stocking Stuffers for the Fruit Lover

Give these individually or gather them into one special gift bag. There is a utensil for almost every fruit you can imagine.

Apple Corer

Pineapple Slicer

Cherry and Olive Pitter

Melon Baller

Adjustable Mandolin Slicer

Strawberry Huller

Avocado Slicer and Pitter

Grapefruit Knife

Peach Pitter and Slicer

Microplane Zester

Onion Goggles

Be the hit of your gift exchange with this goofy, yet very useful protective eyewear. Say goodbye to crying as you slice your onions! Goggles are anti-fog and come with a storage case.



Physical Activity

Simple Step Pedometer

Nothing motivates someone to move more than a pedometer. Give the gift of activity by purchasing a quality pedometer (price range around \$20 and up). Simple step counters are best because they are less complicated than those that count calories or measure one's stride. Keep it simple.

Stainless Steel Water Bottle

Help them dump the plastic (and BPA phosphates) and drink from a stainless

(continued on WIC Wellness Works - Insert D)

Wellness at Work: It Can Be Done!

Making time for wellness can be difficult no matter who you are or what your schedule may be. Making time for wellness at work can be even more challenging but many Texas WIC agencies are up to the challenge. Two agencies that have integrated wellness activities into their work routines are LA 31 and LA 87. These two agencies are not only making a difference in the lives of their employees but are positively influencing the work environment.

LA 31 – Walking the Talk

“Creativity and fun were added to our traditional employee training program,” said Angela Fritsch, Bell County Public Health District — Temple, Local Agency 31. The agency set up their annual employee training using an *Amazing Race* theme, where employees moved from station to station in different parts of the building to receive training and information on a variety of required topics (civil rights, customer service, etc.). Wellness was featured as a main station where employees worked in teams to complete two of four *Minute to Win It* style activities. Employees had fun and the agency found a creative way to incorporate wellness into their job training.

Additionally, every day at 11:45 a.m. all employees are given a 15 minute option to exercise. At the administrative office, an announcement is made over the PA system to remind everyone to take their wellness break. While everyone can join in, those who “choose” not to exercise have to continue working – what a great “incentive” idea! A majority of employees exercise in pairs or groups, either walking outside or using an exercise DVD. The staff donated a collection of exercise DVDs that employees can use during their break. The DVDs are suited to a variety of fitness levels so everyone joins in at their own pace. They have even set up a relaxing meditation station

in a separate area with an eye mask, a CD player with headphones, and calming music. The agency has been doing this for four years now and all four clinics participate. If there are WIC clients in the clinic at that time, they move the activity to a staggered break later in the day. The staff is so committed to their daily exercise break that they make sure to remind the person in charge if someone forgets to announce the break!

LA 87 – Changing the Environment

In September 2010, Local Agency 87 revamped their snack bar located in the DSHS regional office. Prior to the WIC Wellness group “taking charge” of the snack bar, large candy bars, regular chips, regular, non-diet sodas, and other unhealthy snack items were offered. The WIC Wellness team worked with the regional office and overhauled the snack bar. On top of creating a healthier environment for all of the regional office staff, Agency 87 makes a small profit from the healthy snacks in their snack bar. With these proceeds, they recently purchased a stationary bike and a kickboxing bag for their employees to use at work. They now have an elliptical machine on their wish list.

Here’s more about how they accomplished this healthy snack makeover and money maker, in the words of Beth Lloyd, Agency Director at LA 87 in Tyler (and WWW coordinator). “At first, (during the proposal period) some people felt that we were taking their choices away and there was even some talk about doing another snack bar in another office with less healthy items. Now, people seem appreciative of our healthier choices and are especially pleased to find tuna and nuts as some of the choices. The staff is thankful that we got rid of the candy as they didn’t want to be tempted. They like having the 100 calorie snacks to cure their salty cravings and sweet tooth without the excess calories. We surveyed the employees to decide which items to include. We surfed the web for healthy snack ideas, toured Sam’s and Walmart, and brainstormed healthier choices. We put these on the survey of the employees for their preferred choices

recipe

and for write-ins. We no longer have any candy or sugary drinks. We have 100 calorie snacks, baked chips, Craisins, tuna, gum, and nuts. Occasionally we have cheese and Skinny Cow ice cream. They aren't power foods, but they are much healthier than what we offered before. We have talked about how we can include fruits that are in season. We want to make sure that we make a profit and that the produce doesn't spoil before it sells. We are constantly adding and trying.”

According to Beth, their regional director, Dr. McGaha, frequents the healthier snack bar and thanks the WIC staff for taking a leadership role in promoting wellness.

Congratulations to LA 31 and LA 87 for creating a healthy environment at work and for helping all WIC staff make wellness a priority!



Yummy Gift to Give!

Looking for a unique and personal gift? Mix up a special soup mix and place it in a pretty holiday container. Guaranteed to be a hit!

Friendship Soup Mix in a Jar

<http://allrecipes.com/Recipe/Friendship-Soup-Mix-in-a-Jar/Detail.aspx>

Ingredients

- ½ cup dry split peas
- ⅓ cup beef bouillon granules
- ¼ cup pearl barley
- ½ cup dry lentils
- ¼ cup dried onion flakes
- 2 teaspoons dried Italian seasoning
- ½ cup uncooked long-grain white rice
- 2 bay leaves
- ½ cup uncooked alphabet pasta

Directions

In a 1½ pint jar, layer the split peas, bouillon, barley, lentils, onion flakes, Italian seasoning, rice, and bay leaves. Wrap the pasta in plastic wrap, and place in the jar. Seal tightly.

Attach a label to the jar with the following instructions: Friendship Soup ADDITIONAL INGREDIENTS: 1 pound ground beef, black pepper to taste, garlic powder to taste, 1 (28 ounce) can diced tomatoes - undrained, 1 (6 ounce) can tomato paste, and 3 quarts water. TO

PREPARE SOUP: Remove pasta from top of jar, and set aside. In a large pot over medium heat, brown beef with pepper and garlic; drain excess fat. Add diced tomatoes, tomato paste, water, and soup mix. Bring to a boil and then reduce heat to low. Cover, and simmer for 45 minutes. Stir in the pasta, cover, and simmer 15 to 20 minutes, or until the pasta, peas, lentils and barley are tender.

Nutritional Information

Amount Per Serving Calories: 101 | Total Fat: 0.6g |
Cholesterol: < 1mg

Holiday Gift List

(continued from WIC Wellness Works - Insert A)

steel water bottle during their workouts. As an added extra, stainless steel bottles tend to keep your drinks colder than their plastic counterparts.

Motion-Controlled Video Games

Does your gift recipient have a Wii or an Xbox? If so, select one of the new motion-controlled games such as “Just Dance” or “Wii Fit.” Some of these are expensive so consider going halves with someone.

Exercise Equipment for Home

Consider a yoga mat or a stability/exercise ball to help with some at home physical activity. Mats are great for nighttime stretching or basic sit up work while watching TV. The exercise ball has become a popular way to help strengthen abs, core, and lower back while working on balance. Match the correct size with your gift recipient’s approximate weight and height before selecting one. Local discount stores carry both of these items.

Resistance Bands

Also found at local discount stores, resistance bands are a gentle way to introduce strength training to your loved one. And since they are small and lightweight, they can be stored just about anywhere!

Personal Training Session

Jump-start their New Year’s Resolution with a gift certificate for a single session or series of sessions with a personal trainer — nothing like some personal attention to motivate someone to be active.

Stress Management

“Your Half Hour of Peace – A Guided Imagery Meditation for Physical & Spiritual Wellness.”

This popular CD audio book will provide some much needed stress relief as a soothing voice helps you gently release tensions that have built up throughout the day.

White Noise CD

Nothing like the soothing sounds of waves breaking on a beach or a good hard rain to help relax or even bring on sleep. “White noise” CDs are particularly helpful in drowning out more unpleasant or disruptive sounds like snoring or other environmental noise.

Gel Eye Mask

Sooth those tired eyes with a gel filled eye mask or rice filled eye bag (gel mask can be cooled in the fridge and rice bag warmed in the microwave).

Scented Bath/Body Products

Citrus or geranium fragrances are mood lifters. Lavender is relaxing and stress releasing. Peppermint and other mint oils are good pick-me-up scents for candles and potpourri, but may be an irritant for some people so avoid purchasing body care products with these oils in them.

Flowers or plants

What better way to boost someone’s mood than a potted plant or flowers? Research shows that people who work near flowers or plants often have a more positive outlook and lower reported stress. A flowering plant may be better than cut flowers since it can last longer.

Funny Book or DVD

Amuse your gift recipient! Humor is a great stress reducer! Select a book with fun quotes or cartoons, or perhaps a DVD of their favorite childhood TV show. Giving the gift of humor can be a laughing matter (just make sure it isn’t offensive)!

With a little imagination, you can give a holiday gift that stands out and shows how much you care about that person. Happy Holidays!

Nutrition Education Fairs Enhance CCNE and WIC Participation for Local Agency 31

by Debbie Lehman, Ph.D., R.D., L.D.
Nutrition Education Consultant



Ideas are kept fresh at the Nutrition education fairs in LA 31, Bell County Public Health District. Each of their four clinic sites hosts a fair monthly. Clinic nutritionists display four or five nutrition education topics related to breastfeeding, infant feeding, general nutrition, healthy cooking, and other topics relevant to client interest. They include a cooking demonstration to promote their Obesity Prevention Mini Grant program and the “ABC Class” (Activities Balanced with Cooking). Several community partners set up booths as well, including agencies providing immunizations, pediatric home health, substance abuse, dental care, and more.

Fairs run all day with peak times around 9 to 9:30 a.m. and 2:30 p.m. Clients are scheduled in 15-minute time slots. During a fair, 165 to 250 families are seen. Participation in the fairs has gone up in the two years since they have begun, and flow through the clinic is continually improved.

Participants are given a list of five questions when they enter the fair, and they review the displays and talk to WIC staff to gather information for the questions. WIC nutritionists are stationed by the booths to interact with the participants. LA 31 quickly learned it was easy to overload the display boards with text. So, the boards incorporate generous use of visuals, are bilingual, and text is at a fifth-grade reading level.

In addition to the displays, two to three WIC handouts per station, one WIC give-away, and recipes are offered. Staff provide samples of the food prepared in the cooking demonstration. In addition, families can watch and dance to a WIC video, and kids can play nutrition games.

Participant benefits are loaded onto their cards while the participants attend the fair to minimize the wait time. Once WIC clients have answered all questions correctly, they are issued their benefits.

While the fairs can be challenging to organize, they appear to be worth the effort. Keeping a checklist of the components of each booth, including quantities of education materials needed, is important. During the first few fairs organizers may spend time examining and perfecting the flow of traffic and staff.

Staff must be excited about change and doing something different to have a successful nutrition fair.

“It’s a process that begins with an idea of what you’d like to see and changes with the needs of the clinic and the clients,” said Jessi Cano, RD, LD, nutrition education coordinator. “There will be constant tweaking to make the fairs flow better and to offer a better experience for the clients and staff. Each fair takes on a life of its own.”

The fairs are fun. Clients are engaged and feel important. They recognize them as a learning event. In fact, clients are so appreciative they often come and thank you for taking the time to put together the fair and all the good resources. At LA 31, the education fairs are the perfect Client-Centered Nutrition Education approach to health promotion.



The Power of Influence

by Frances Diep, R.D., L.D.
Nutrition Education Consultant

While WIC is a supplemental food program that offers nutrition education to participants, it is also a program that strives to inspire behavior change. We may seldom think of WIC as a behavior change program but by providing nutrition education to our participants, our hope is that moms, children and families will take the information provided to them and apply it to their lives. Many of us also know that simply providing nutrition information often does not translate into behavior change. In order to promote behavior change we must not only be able to educate but also empower, inspire, and influence our participants to make healthy choices. Because of this, being a person of influence and creating a supportive and influential clinic environment is essential to moving clients towards behavior change.

In 2009 and 2010 the Southwest Regional USDA FNS office funded the development of science-based Power of Influence tools for the Chickasaw Nation WIC program. The Power of Influence tools and training developed by Pam McCarthy and the Chickasaw Nation WIC staff transformed their WIC program. This transformation had such a positive impact on the participants and staff members that the SW Regional FNS wanted to spread the Power of Influence by offering the City of Dallas WIC program the opportunity to host the first SW Regional Power of Influence training.

In order to train all of their staff, the City of Dallas WIC program provided three training dates that occurred between May and August 2011. These trainings were conducted by Pam McCarthy and members of the Chickasaw Nation WIC. Staff members were introduced to the six influence principles as well as influence tools and techniques which they also had an opportunity to practice. The six influence principles are likability, reciprocity, consensus, consistency, authority and scarcity.

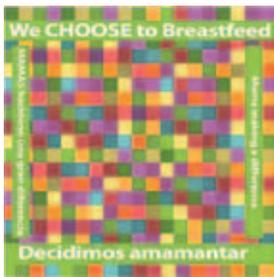
The first influence principle of likability states that people are more influenced by people that they like and by people who are like them-



selfes. To tap into this principle, posters can be displayed in clinic waiting rooms with photos and introductions to clinic staff. This allows participants to get to know the staff even before meeting with them. Another small change that makes a huge impact is sitting knee-to-knee with participants. Removing barriers between the clients and staff makes participants feel more open to discussing their deepest needs and concerns. A few other practices to enhance likability are practicing authentic deep listening, greeting participants warmly whether by phone or in person, and using the names of participants and their children rather than generic terms such as “mom” and “baby.”

People tend to feel obligated to give back when something has been given to them. This is the principle of reciprocity. When we provide gifts such as kindness, empathy, attention, respect, recognition, and solutions to our clients as well as our teammates we can expect to be given these gifts in return. A gift that the Chickasaw Nation WIC program chose to give to parents is to teach them about the “five S’s system” developed by Dr. Harvey Karp which induces the “calming reflex” and can be used to calm a fussy baby whose physiological needs have been met. The Chickasaw Nation WIC program also developed a gift tag that lists each step of the five S’s which can be given to parents as a reminder.

The principle of consensus states that people tend to follow the lead of others, especially if they are people who are similar to them. Testimonial books in waiting rooms filled with stories from moms who have chosen to make certain changes in their lives or chosen to breastfeed their babies



can be a powerful influential tool. In addition, breastfeeding consensus boards with photos of many moms who have chosen to breastfeed their babies can powerfully influence a mom to choose to breastfeed as well.

Consensus boards also tap into the principle of consistency which states that people want to be consistent with what they say they are going to do and with the thoughts that others have of them. If we let participants state their own goals and desired behaviors, in writing or publicly, and enable them to make commitments to certain behaviors such as breastfeeding, they will be more likely to follow through. Moms can fill out breastfeeding pledge cards as a pledge to themselves and their baby to choose to breastfeed.

Two other techniques practiced at the trainings were “mentioning a weakness in your case”, and “framing the loss.” These two communication techniques tap into the influence principles of authority and scarcity. The principle of authority states that people tend to follow the lead of those who are credible. We can increase our credibility by mentioning a weakness in our case which helps to show participants that we have their best interests in mind, understand their situation, and that we are being honest. For example, in the case for breastfeeding we can use a statement such as “It does take a while to learn to breastfeed but the bonding with your “little miracle” is a memory you will treasure forever.”

The principle of scarcity states that when opportunities are limited they appear more valuable. People also tend to be persuaded by what they stand to lose. Framing the loss is a

way of sharing with participants what they will miss if they don't take action. An example of framing the loss in the case for breastfeeding is to remind mom that the opportunity to breastfeed her “little miracle” comes only once in a lifetime and is something that only she can do.

Staff members have shared that both Value-Enhanced Nutrition Assessment and Client-Centered Nutrition Education principles are enhanced and supported by the Power of Influence tools and techniques. By creating an environment that is warm and welcoming participants are more open to sharing their concerns, setting meaningful goals, and participating in group discussion.

Within weeks of the first training, the testimonials from the City of Dallas WIC program staff began pouring in. Nutritionist Kristen Zimmerman said, “I never thought helping moms with their car seats, addressing the baby by name, or counseling knee to knee would make this much of a difference. I not only enjoy listening and getting to know our participants more, but the clients are really starting to notice and love the changes in the clinic as well. They are beginning to remember me by name and thank me for the real care I have for their children.”

Another staff member stated, “People don't care how much you know, until they know how much you care.”

Regardless of your role, you can help inspire change by finding ways to let participants know how much you care. Not only have staff members found the changes empowering and gratifying, participants have noticed a difference too. Just days after the first training, Alethea Borrego, nutritionist and area nutrition education coordinator said “A mom came into our clinic and asked if we had new staff. We know though that there are no new bodies, only new hearts.”

The Power of Influence provides tools and techniques to inspire behavior change as well as help create rewarding and life changing experiences for both participants and staff. Look for future Power of Influence trainings and materials and choose to take part in the revolution. To learn more about WIC Influence visit www.wicinfluence.com and www.wakethedream.com.

Choose MyPlate

by Leona Duong, RD, LD
Clinical Nutrition Specialist

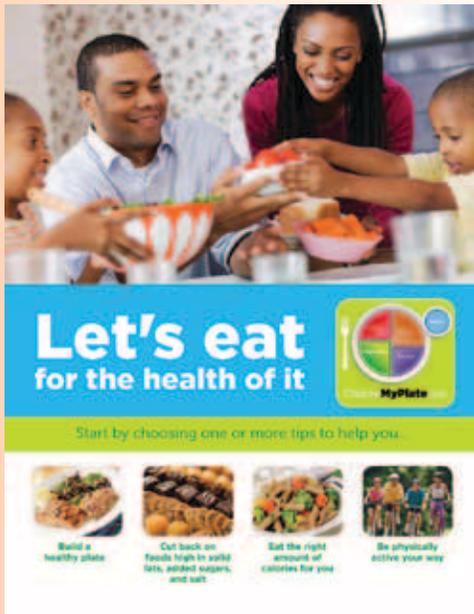


For many years we have used the food guide pyramid as a tool to educate our clients on the basics of nutrition. This educational tool was transformed from a pyramid into a plate on June 2, 2011. The new icon was launched in response to the *2010 White House Childhood Obesity Task Force* report that called for a new and simple icon to assist people with meeting the 2010 Dietary Guidelines.

This icon illustrates the science-based principles of the dietary guidelines as well as serves as a visual cue to assist and remind people to

make healthier food choices. Its simple round shape is intended to grab people's attention. The plate is a familiar meal time symbol that is linked to food and can help people focus on how their plate should look. As educators, this allows us to use a tool that is visually relevant and easily applicable to the public. It provides us with the opportunity to effectively deliver our nutrition message to a diverse and multicultural society while addressing various global perspectives on food. The layout of the plate is used to communicate the following 2010 Dietary Guidelines recommendations:

| | | | |
|---|----------------------------------|--|--|
| <p>Make half your plate fruits and vegetables</p> | <p>Vary your protein sources</p> | <p>Make at least half your grains whole grains</p> | <p>Switch to fat-free or low-fat (1%) milk</p> |
|---|----------------------------------|--|--|



Brochure

It is our role as nutrition professionals to make the 2010 Dietary Guidelines easy to understand for our clients so that they can incorporate it into their daily lives. Keep in mind that one symbol alone cannot be the sole tool in communicating the benefits of good nutrition to our community. We need to combine MyPlate, easy to understand messages, and other motivational/educational tools to guide the public into making healthier food choices. This combination of techniques will help increase the nutrition literacy of the U.S. population. Multiple resources for the general public as well as the nutrition professional can be found at www.choosemyplate.gov. Of these resources, there is also a great consumer brochure that is available for distribution to our clients.

References:
www.choosemyplate.gov
www.bellinstitute.com/

November is

Prematurity Awareness Month!

by Kimberly Petrilli, M.S.P.H., M.S.W.
Director of Program Services
Austin Division, March of Dimes

The March of Dimes works to improve the health of babies by preventing birth defects, premature birth and infant mortality. There are several key initiatives of which WIC clinics need to be aware.

Prematurity Awareness Month

Throughout the month of November, the March of Dimes will be working with community partners across the state to promote awareness of the seriousness of premature birth. Opportunities to participate in Prematurity Awareness Month activities are available throughout the state.

Healthy Babies are Worth the Wait

Based on a pilot initiative in Kentucky, the *Healthy Babies are Worth the Wait* (HBWW) initiative is expanding to Texas with sites in Houston and Dallas. *Healthy Babies are Worth the Wait* is a preterm birth prevention initiative with a bundled intervention approach that focuses on “preventable” late preterm births. Seventy-two percent of preterm births in Texas are late preterm births (babies born between 34 and 36 weeks gestation), making this an important initiative to decrease the leading cause of newborn death: premature birth. Through partnerships and collaborations between

hospitals, health departments and community organizations, HBWW provides education for pregnant patients, perinatal providers and the community on the problem of preterm birth, risk factors and strategies for reducing risk.

WIC/ March of Dimes Prematurity Prevention Collaboration

As part of the *Healthy Texas Babies Initiative* with the Texas Department of State Health Services, the March of Dimes is partnering with Texas WIC to provide education on premature birth and promote the importance of a full-term pregnancy. Beginning in the fall, WIC clinics will begin receiving March of Dimes and WIC co-branded prematurity posters to post in their clinics.

For more information on the March of Dimes, please visit the March of Dimes Texas Chapter website at: www.marchofdimes.com/texas or contact Kim Petrilli, Director of Program Services Austin Division at kpetrilli@marchofdimes.com.



A New Way of Looking at Premature Births

— *Life Course Perspective*



by Roxanne Robison, R.D., L.D.
CSHCN Nutrition Consultant

Why does the United States, a country that spends more on health care than any other nation in the world, rank 29th in terms of infant mortality compared to other developed nations? The biggest risk factor for infant mortality is premature birth, defined by the World Health Organization as being born less than 37 weeks gestation. Furthermore, African American women in the United States have twice the preterm, low-birthweight rate than do white or Latina women. Increasing access to prenatal care has not been successful in improving the problem. The answer, according to some researchers, can be found in an emerging social/medical concept called the *Life Course Perspective*.

be looked upon as an isolated event, but rather everything that has happened to a woman to influence her health in her lifetime up until that time predicts how that pregnancy will turn out. In other words, you can't cure a lifetime of ills in 9 months of pregnancy.

As evidence to support this theory, proponents point to the fact that black women who live in Africa or the Caribbean have a lower incidence of having preterm/low birth weight infants than if they live in the United States. Therefore, it cannot be explained by genetics, but something about the pre-pregnancy experience in the United States is detrimental to their pregnancy outcomes.

In the United States, the traditional medical model of health care, in which all doctors are trained, involves taking a medical history, doing a physical exam, ordering diagnostic testing as indicated, and prescribing treatment. The medical model is focused on the physical and biologic aspects of disease.

In contrast, the life course model is based on the premise that the broader environment — biologic, physical and social — strongly affects the capacity to be healthy. Where we live, learn, work and play has more to do with health than direct access to health services. Pregnancy should not

The life course model provides a conceptual framework to explain disparate health problems from a new perspective and to begin to address the root cause of disease. More funding can be spent in prevention, especially during critical or sensitive periods in life rather than treating disease. The life course theory, as explained in the concept paper commissioned by the Department of Health and Human Services (Nov 2010), contains four key concepts, which simply stated include:

- Today's experiences and exposures determine one's future health.
- The broader community environment — biologic, social and physical — strongly affects the capacity to be healthy.
- Future health can be particularly affected during certain critical or sensitive periods in a person's life.
- While genetic make-up offers both protective and risk factors for disease, inequality in health reflects more than genetics and personal choice, i.e., behavior.

The model can be applied to any aspect of health including pregnancy. What are the potential conditions that predispose black women to an increased risk for having a low birth weight premature baby?

Social determinants of health, the life course theory holds, include neighborhoods, job opportunities or lack thereof, domestic violence, crime, and exposure to toxic chemicals. These are factors outside the individual — beyond genetics and beyond personal choice. For example, racism over the life course can cause chronic stress, which may lead to more stress hormones produced during pregnancy, which may lead to preterm labor. If a woman is worried about her physical safety or how she will pay her bills, her body will produce more stress hormones which can affect the intrauterine environment. Poverty and stress can therefore have clinical manifestations.

The correlation between increasing income and life expectancy has long been known. Children in poor families are seven times more likely to be in poor or fair health than children in the highest income families.

Epigenetics, a relatively new science, fits into the life course model. It holds that environ-

ment (including the intrauterine environment) and what we eat and drink can change the way that genes are expressed. It provides an understanding of how our physical environment gets embodied into our physical bodies. So, future chronic disease, or health, may be programmed into an individual even before they are born.

Neighborhoods can be designed with sidewalks to encourage walking. This can promote a healthy lifestyle, but not if there is fear that the neighborhood is an unsafe place to walk. Solving these issues may result in reducing the risk of obesity, a condition that puts a woman at higher risk for having a preterm baby.

Other factors relevant to life course theory and pregnancy include access to primary health care as well as issues of family planning, including pregnancy intention and inter-pregnancy interval. The length of time between pregnancies appears to be strongly related to the occurrence of very preterm birth. Shortened intervals of less than six months double the risk compared with an ideal interval of 18 to 23 months. The use of pre-conceptional multivitamins may lower the risk of very preterm birth and black women are half as likely to use multivitamins, one study showed.

The Maternal and Child Health Bureau and the Health Resource Systems Administration are federal programs that are looking to increase the knowledge of the life course theory, revise policies to assure coordination between state and local health departments, support programs that support families from the earliest stages of development and support cross-program collaboration.

WIC is a program that already demonstrates many of the principles of this model. By making referrals for smoking cessation, drug and alcohol treatment and prevention, promoting exercise, good nutrition and breastfeeding are ways to change the life course of an individual — and future generations.

To learn more about the life course model, check out:

<http://www.hrsa.gov/ourstories/mchb75th/images/rethinkingmch.pdf>



What's New in NE

by Erica Harris, M.S., R.D., L.D.
Nutrition Education Consultant

Out with the old in with the new — the Nutrition Education Branch has been keeping up with trends by updating materials during 2011. Two trends that have become popular over the past few years are Client-Centered Nutrition Education (CCNE) and web-based education via Texaswic.org. The state agency has

been busy revamping lessons and materials to keep up with the times.

Trends in NE

1) CCNE – Most local agencies across the state have adopted CCNE in one form or another. A more relaxed classroom setting and renewed focus on engaging clients has paid off, resulting in increased satisfaction among instructors and clients. New CCNE lessons, a new CCNE webpage (<http://www.dshs.state.tx.us/wichd/nut/ccne.aspx>), and quarterly Qwest updates have kept CCNE rolling full force. New CCNE lessons include:

- IF-000-22, CCNE Baby's First Bites
- GN-000-24, CCNE Cooking with WIC Approved Foods
- FE-000-08, CCNE Shop Smart and Save
- CF-000-26, CCNE Great Tips for Feeding Kids
- GN-000-25, CCNE Healthy Media Diet
- GN-000-28, CCNE How Sweet is Your Drink?
- PN-000-09, CCNE Postpartum Grab Bag
- NR-000-18, CCNE Building Strong Blood
- GN-000-26, CCNE Texas Chili Cook-Off
- GN-000-27, CCNE Whole Grains, Whole Nutrition

A new lesson evaluation process has also been developed — online evaluations for local agency staff feedback and Scantron evaluations for client feedback. Streamlining this process will enable lesson developers to create even better lessons over time. Be on the lookout for more!

2) Web lessons on Texaswic.org – Online education allows clients to receive nutrition education in the convenience of their own home on their own time, and reduces traffic in the clinic. Reports show that over 40,000 users frequent the site each month, and popularity keeps growing. New online lessons include:

- Whole Grains for Good Health
- Baby's First Foods
- Tips for Feeding 1-2 Year Olds
- Tips for Feeding 2-5 Year Olds
- Help Your Child Have a Healthy Weight
- Preventing Anemia with Iron Rich Foods

More web lessons are in development, including lessons on dental health, beverages, and women's health.

3) Revamping materials – In addition to lessons, many other nutrition education materials are also undergoing revision. For example, updated brochures have been developed for seven common infant and child topics (crying, colic, constipation, diarrhea, food allergies, tooth decay, and spitting up). The USDA's announcement last summer of the MyPlate graphic replacing MyPyramid is also spurring revisions of other participant education materials. And to keep staff up to date, a full revamp of nutrition education staff training and modules are in progress. New materials are announced via memo, so watch for updates.

It's been a busy year, and we look forward to more progress in 2012!

Happy Trails, Sandy!

by Lindsey Randall
Breastfeeding Promotion Nutritionist

In August 2011, WIC said goodbye and good luck to a fabulous leader in nutrition education, Sandy Kuehl, as she finished her illustrious 21 year career with the Houston Department of Health and Human Services, Local Agency 26. Sandy spent the last eight years with the WIC program, but during the past four years, she has served as the nutrition education (NE) coordinator for local agency 26 where she was responsible for overseeing the education of approximately 85,000 participants at 16 sites.

Prior to her time as NE coordinator, Sandy provided High Risk Counseling for WIC and also served Houston's Maternity and Children population as a registered dietitian at the seven Health Department Health Centers. As part of the Obesity project, Sandy appeared on Houston's Municipal Channel with shopping and cooking tips. Over her career she also presented local agency information, ideas, and tips at different nutrition conferences, including the 2011 NBF Conference in Austin.

As an advocate for both nutrition and breastfeeding education, Sandy impacted the Houston community in a big way by listening to the needs of those around her and by putting her participants' needs first. Those who know Sandy best describe her overall approach to participant and staff education as practical, effective, and entertaining.

Before departing, Sandy was asked to recall any events or monumental moments that stood out over her career as an RD for the City of Houston WIC Program. With a sigh and a chuckle, Sandy reflected on the years of fun she had and decided that the highlights of her career include being filmed for the grocery store and



cooking demonstrations on Houston's Municipal TV channel and of course, being filmed in the Spring of 2010 for inclusion in The Real (WIC) World, Client Centered Nutrition Education DVD.

Lifelong Houston resident, Sandy looks forward to new adventures including traveling, attending music festivals, and renovating her home with her husband.

The state agency recognizes Sandy's hard work as an ongoing accomplishment. She has set high standards in providing Houston participants with quality NE as well as providing support and training to WIC staff.

Luckily for the world of nutrition, Sandy promises to stay close to her roots by continuing professional educational requirements needed in order to maintain registration. Thus, this is not goodbye, but rather we will see you later!

Sandy, we wish you nothing but the best!



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Publication No. 06-10664

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