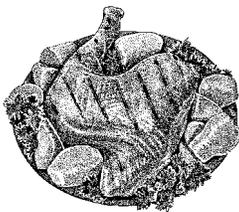


Other Dietary Considerations

For some WIC participants it may be useful to collect additional dietary information beyond what is needed for certification or recertification. For those participants there may be a need for additional detail about what a person eats or it may be important to gather information about how they eat.

In general, great detail is not required about a person's diet. For certification/recertification purposes WIC is mostly concerned about what foods a person eats and how much of each. For some participants it may be necessary to collect more detailed information about specific foods, portion sizes, how the food is prepared, and what is added to the food at the table and while cooking. For example, if a postpartum woman is concerned about her weight it may be appropriate to ask whether the chicken she ate was fried, whether she added gravy or butter to her mashed potatoes, and how much salad dressing she added to her lettuce salad. We need to know how to cut calories from her diet. In order to do this we first need to know where the calories come from in her diet. When collecting this kind of information it should be listed on a 24-hour Food Recall form by WIC staff as they ask specific questions about the foods eaten. Again it is very important to collect the information in a non-judgmental and non-threatening manner. Here is an example of why collecting this level of detail for an overweight woman might be important:



Below are two diets with the same foods as reported by a WIC participant. One is as the participant completed the 24-hour Food Recall and the other shows the same 24-hour Food Recall with detail added after questioning by a WIC staff member.

Diet I (as reported)

Chicken breast 5 oz
Mashed potatoes ½ cup

Green beans ½ cup
Lettuce salad 1 cup

Milk 1 cup
Ice cream 1 cup

Diet II (after detail is added)

Fried battered chicken breast 5 oz
Mashed potatoes ½ cup with ¼ cup gravy
Green beans with bacon ½ cup
Lettuce salad 1 cup with ½ cup dressing
Whole milk
Premium vanilla ice cream 1 cup with 1/4 cup hot fudge

If a participant has normal weight for height it may still be appropriate to ask general dietary questions about fat intake. High fat diets can cause heart disease even in normal weight people.



In terms of nutritional adequacy (as evaluated by the food group method) both diets are the same. However, if the issue is calories there is a very big difference between the two diets. If we assume Diet I is a low fat diet as it appears the diet provides about 560 calories. After adding details to Diet I it now provides 1750 calories (Diet II). Quite a difference for a person trying to lose weight. If the WIC participant was of normal weight there would be no reason to ask for the additional detail. Diet I tells us about nutritional adequacy. But if the woman was overweight and was asking for ways to modify her diet to reduce her weight then the detail on the right would be necessary. By using the detail on the right it would be possible to design a diet for the woman that has the same amount of food, but about 1000 calories less. Over the course of a week a woman making this type of change would lose about two pounds of body fat if she made no other changes to her diet or her activity level.

There are other times when added detail is needed in terms of what a person eats. With a woman who has gestational diabetes or a child with a metabolic condition sometimes very detailed dietary information is needed. Collecting this level of detail is usually reserved for the WIC dietitian or nurse. In these circumstances, after the person has given their diet recall information, the WIC dietitian or nurse would review the diet with the participant asking about specific foods. Details should be recorded on the Food Recall sheet as in example C.

When gathering dietary information it may also be important to ask questions about how a person eats. How a person eats will usually influence what they eat and how much they eat. This information can be very important in trying to help a person to make dietary changes. How a person eats can also impact other aspects of a person's life including their family life, how they socialize, and how they function day-to-day.

Here are some examples to show "how you eat" can impact "what you eat":

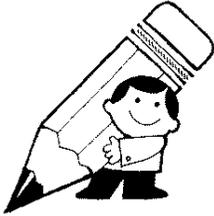
A mother comes into WIC and tells you that her child will not eat meals. The mother spends time cooking meals for her family and is very disappointed that her child will not eat what she fixes. The child complains that he is not hungry at meal times. As an astute WIC staff member you ask the mother about when the child does eat. From the mother's response you quickly get a picture that the child is allowed to eat between meals, whenever and whatever he wants. The likely reason

the child won't eat at meals is because he gets to eat between meals. He fills-up on food before meals or waits until after meals to ask for food as a means of getting individual attention. By changing how the child eats (only one small planned snack between each pair of meals) the child will soon learn to eat his meals and likely will change what he eats.

A postpartum woman comes into WIC and tells you that she has not been able to lose any weight since delivery. She is breastfeeding and heard that it is a good way to lose weight. Upon questioning the woman you find that she doesn't fix meals or eat at the dinner table. Instead, she snacks all day while working at home on her computer. As a trained WIC staff person you realize that she probably overeats because of how she eats. The woman is likely to eat more junk food and high calorie convenience foods because she is snacking instead of eating meals. She is also likely to be overeating because she eats while she is distracted working on the computer. If she eats meals and snacks at the table without distractions she would probably be able to better control her food intake. When you are aware of what you eat you generally have better control.

When assessing a 24-hour Food Recall or Food Frequency there is neither time nor a need to ask all WIC participants in-depth questions about how they eat. Questions are most appropriate when the diet recall or the person's growth or size indicate that there are significant problems with their diet. For example there would be no reason to ask detailed questions about a person's diet if their only dietary deficiency is a lack of vitamin A and their weight or growth pattern is normal. On the other hand if a child eats no fruits or vegetables and his weight is steadily increasing above the 95th percentile for age, then detailed dietary information would be helpful. By knowing more about how the child eats the WIC staff member can better help the parent to modify the child's eating pattern to improve the child's health.

When WIC staff ask detailed dietary information about how a participant eats it is important to document the information in the participant's nutrition education record. This helps staff to give a consistent message to the participant and helps staff develop a better picture of the participant's dietary habits. It is also annoying for the participant to be asked the same questions over and over again by different staff members or even by the same staff member at different visits.



Some of the questions that may be important to ask about how a person eats include:

- When do you eat during the day?
- Do you eat scheduled meals and snacks? Do you eat at other times too?
- Where do you eat your meals and snacks? At a table? In front of the television? While talking on the phone?
- Do you cook foods or do you generally eat convenience foods?
- Do you cook foods or do you generally eat cold foods like cereal and sandwiches?
- Who cooks the meals in the home? Who buys the food for the household?
- How often do you eat out?
- Is cooking and refrigeration a problem where you eat your meals? (A person may have a stove and refrigerator at home, but they may eat most of their meals somewhere else such as at work).
- What is the atmosphere like at the table when the family eats together? Is it a pleasant time or is it a time of stress? Is the television on when you are eating at the table?
- Does your child eat with you at the table?
- Do you allow your child to have snacks whenever they want? Are snacks given at set times?
- When does your child have snacks?
- Does your child eat what other families members are eating or do you prepare special foods for your child?
- How much choice does your child have in what they eat for dinner?
- Are there any foods that are restricted in the home or at meals?
- Is your child allowed to choose how much they want to eat? Is the child allowed to ask for seconds?
- What happens when the child refuses to eat a particular food or an individual food?
- Is food used for reward or punishment? Is food used as entertainment when the child is bored?
- Describe your child's appetite.

Not all of the above questions need to be asked of each participant when more dietary information is needed. WIC staff should ask only questions which are appropriate to the individual participant. Sometimes the only question that needs to be asked is “Tell me about how you (or your child) eat.” The participant will sometimes answer all of the above questions that are related without being asked specifics.

Because a 24-hour Food Recall gives some information about how a person eats, while a Food Frequency form does not, it is generally recommended that a 24-hour food recall be used when dietary information is needed for high risk counseling. If the participant completes the 24-hour Food Recall correctly it shows how foods are grouped into meals and snacks and times for the meals. The participant gives you some of the details of how they eat with the 24-hour Food Recall while a Food Frequency does not indicate even the specific foods that were eaten.

Review the information below. It lists situations when it would be useful to ask more detailed diet questions.

Detailed Dietary Information May Be Helpful When:

- 24-hour Food Recall or Food Frequency indicate a diet that is inadequate in several servings in a couple of food groups.
- 24-hour Food Recall or Food Frequency indicate a very erratic diet (for example they show unrealistically small or large amounts of food consumed or when entire food groups are missing).
- Parent or guardian complains that the child has poor food habits, won't eat, is a very picky eater, has behavioral problems associated with food or meals.
- For an adult woman who is a WIC participant having trouble gaining weight during pregnancy, gaining too much weight or having trouble losing weight after pregnancy.
- For an adult woman who is substantially overweight or underweight at any time.
- For a child who is not growing well—he/she is either overweight, underweight, or is not following normal growth channels.

Example: Jane Smith, a 4 year old child, is being certified on WIC. Her weight for age is less than the 5th percentile while her height for age is barely at the 10th and has not been keeping up with normal growth. Her weight-for-height is below the 5th and has been decreasing. Jane's mother tells you that she is very concerned about her daughter's size. Jane does not like to eat and is a very picky eater. Jane's 24-hour food recall shows the following:

Breakfast:	1/2 slice toast with a little butter 1/2 cup grape juice 1/2 banana
Lunch:	1/3 slice bologna 1 cookie 1 cup fruit punch
Snack:	8 raisins 1/2 cup fruit punch
Dinner:	3/4 cup macaroni and cheese 1/2 cup green beans 1/2 cup milk

After looking at the 24-hour food recall it is obvious that this child does not have a good diet. Coupled with the mother's comments about poor intake, picky eater, and concern about the child's size, and the information from the growth grids you should be concerned about this child's dietary intake.

What other questions would you ask?

<u>Question</u>	<u>Mother's Answer</u>
• Does the family eat meals together?	Generally yes.
• Does Jane eat her meals with the family?	Not usually. May eat lunch with the mother.
• How do you determine when Jane eats?	Jane determines when she eats.
• Does she eat the same food as the rest of the family?	"No, she generally wants something else. I cook what she wants because I am so concerned about her growth."
• Does she eat at the table?	No.

All of the above information would be very useful in determining a course of action to help this mother to improve Jane's dietary habits. The information gathered should be documented in the Jane's nutrition education record so that when she is referred for high risk counseling the dietitian or nurse will not have to ask the same questions. Many times an educator will also pick up a piece of information that wouldn't be offered to the dietitian or nurse. Documenting the participant's comment gives staff a better picture of the participant's situation.

#6 Practice!



The nutrition questionnaire that is completed for each child at certification/recertification visits asks questions about how a child eats. Look at a questionnaire for a child. List at least five questions that are on the questionnaire that ask about how a child eats. For each question you choose list what the answer might tell you about how the child eats.

- 1.
- 2.
- 3.
- 4.
- 5.

Answers to the Practice!
are at the back of the module.