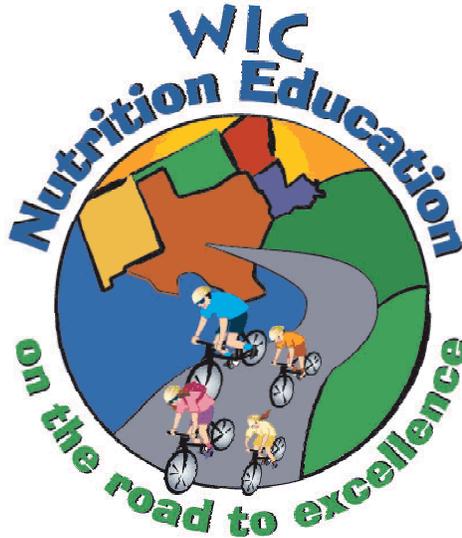


WIC Video-Teleconference
April 3, 2003



Evaluation

Submitted June 26, 2003 by:

Dayle Hayes, MS, RD

Nutrition for the Future, Inc.

3112 Farnam Street, Billings, MT 59102

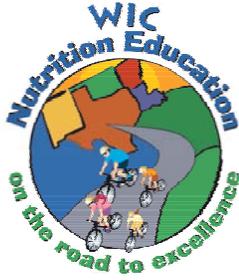
VOICE: 406/655-9082

E.MAIL: EatWellMT@aol.com

www.pizzazzpresents.com

www.montanadieticassociation.org/promo.html

www.billingsclinic.com/nutrition



OVERALL COMMENTS ON CONFERENCE

Wow! I am so impressed with the quality of speakers and information provided at today's conference! There is so much that I am taking to our local agency. The tools provided I will use immediately include setting limits on TV and focusing on healthy growth vs. healthy weight. Thank you!

Excellent teleconference!

The information is important in all health and school settings, not just WIC clinics. Very Good!

This is very educational and will keep staff motivated and increase skills for personal and professional developmental growth.

A very good teleconference. I enjoyed this very much.

Great program. One of the best on this topic I've attended.

Healthy growth not healthy weight. Thanks! Presentations were excellent!

Thank you for a great training time today. I enjoyed every moment of it.

I appreciate when speakers give ideas on ways you can communicate growth without being judgmental. I like the actual words like "your child's weight is getting ahead of himself."

Very practical, proven ideas and information are greatly appreciated.

Excellent speakers—received some information that will be useful in the workplace.

This training was very useful - all trainings for WIC staff should be this interesting and informative.

Handouts will be very useful with my programming, but the motivation of the facilitators is very encouraging.

This was definitely the best teleconference that I have been to! Thanks for helping get my family and myself back to being fit.



EVALUATION SUMMARY

On April 3, 2003, the Southwest Region (SWR) WIC Programs traveled down the “**Road to Excellence**” with a video-teleconference (VTC) – **WIC Fit Kids**. Attendance within the five-state region (Arkansas, Louisiana, New Mexico, Oklahoma and Texas) reached an all-time high of more than 2,700 registrants. The VTC was also broadcast nationally, with over 3,000 registrants (239 sites in 33 states) outside of the region! **WIC Fit Kids** was an entertaining, cost-effective way to reach over 6,000 nutrition communicators throughout the US.

A total of 2,266 evaluations from the SW states (AR, LA, NM, OK and TX) and tribal programs (Zuni and Five Sandoval Pueblos in NM; Chickasaw, Cherokee and Creek Nations in OK) were received and analyzed (Table 1). While the content of **WIC Fit Kids** was targeted at WIC educators, registration was open to anyone working with children and families on nutrition and weight issues. Evaluations were received from several other programs, including Head Start, Child and Adult Care Food Program (CACFP), Extension and schools (Table 2).

The **WIC Fit Kids** attendees were a diverse group of nutrition professionals and paraprofessionals (Tables 3 and 4). Over half of the WIC staff (53%) reported working for the program for more than five years. While most attendees worked in education and health care roles (43.5%), a significant number identified themselves as clerical staff (19.3%) or supervisors (16.9%).

In planning **WIC Fit Kids**, the SWR Nutrition Services Program Integrity (NSPI) workgroup had two goals:

- *To enhance the knowledge, skills and abilities of WIC staff to increase their effectiveness in preventing/impacting childhood overweight/obesity.*
- *To promote healthy lifestyle choices to get kids off to the right start.*

The NSPI group also agreed upon several key messages for the conference:

- *Nutrition and physical activity are easier than we believe. Realizing the myths and realities of everyday fitness can help us all “walk the talk.”*
- *Establishing and maintaining a positive feeding relationship is one way to help prevent obesity from birth.*
- *Happy, healthy, fit kids come in all shapes and sizes. Families need new attitudes, new skills and new ways to enjoy physical activity.*
- *Screen entertainment (television, computers and video games) has a profound effect on children’s health and development.*
- *By applying principles of persuasion, WIC staff can be more effective in leading people to positive health behaviors.*

The NSPI workgroup wanted **WIC Fit Kids** attendees to be inspired to take on the challenge of helping families move toward healthy lifestyles. They wanted to offer attendees new tools – and the motivation to try new approaches.

Evaluation of the **WIC Fit Kids** video-teleconference shows that the event was extraordinarily well received by the attendees and very effective in meeting the objectives of the NSPI workgroup. The success of the VTC was confirmed by both quantitative and qualitative analyses of the 2,266 SWR evaluation forms and a random sample of the out-of-region evaluations.

Tables 5 through 9 report results of the quantitative analysis. Since there were no significant differences among states, the tables are a compilation of all 2,266 **WIC Fit Kids** evaluations. Table 5 indicates that attendees heard the key messages identified by the NSPI planners. Factors identified as “most important” to discuss with overweight clients or parents of overweight children were:

- ***Increasing physical activity (91.0%)***
- ***Improving parent-child feeding relationships (54.1%)***
- ***Decreasing television and computer time (40.0%)***
- ***Having regular meals (34.0%)***

Tables 6 and 7 indicate that **WIC Fit Kids** was effective in helping staff feel more comfortable discussing sensitive issues of weight with the families in their programs. An overwhelming majority of attendees (83.6%) said that they were either “very comfortable” or “somewhat comfortable” talking to clients about their overweight children (Table 6). Most attendees also said that the conference had changed how they felt about discussing weight issues – definitely (44.7%), partially (21.6%) or somewhat (14.6%).

The program, speakers and content of **WIC Fit Kids** were all highly rated by the attendees (Table 8). All six speakers and the written materials were rated as a 4 (“very useful”) or higher. The only aspect of the VTC that received less than a 4 was the Q-and-A segments with a 3.64. According to the attendees, the conference was also very effective in motivating them to promote healthy lifestyle changes for their clients at work – and for themselves at home (Table 9).

Analysis of the qualitative data (responses to specific questions and general comments) confirms the success of **WIC Fit Kids**. An independent review by Dr. Kyle Colling of Montana State University-Billings (pages 5 through 7) outlines three ways in which the VTC evaluations were extraordinary:

1. ***The response from attendees was universally positive.***
2. ***Attendees enthusiastically described changes they intend to make in the way they work with clients.***
3. ***Out of 2,266 evaluations, there were only 13 suggestions for improvement!***

Dr. Colling also categorized answers to the two written questions: [9] ***What is the most meaningful thing that you will take to work from this conference?*** (by issue for each state on pages 8-17) and [10] ***What additional information or training would help you promote the concepts of healthy weights for children and families?*** (pages 18-20).

Kyle K. Colling, Ph.D.
Assistant Professor
Montana State University - Billings
1500 University Drive
Billings, Montana 59101-0298

Dayle Hayes, M.S., RD
3112 Farnam Street
Billings, MT 59102

June 23, 2003

RE: External evaluation, participant feedback from the **Fit Kids Regional Teleconference.**

Dear Dayle,

I am so pleased that you asked me to analyze the body of data generated by participants from the Fit Kids Regional Teleconference. As a general rule, you know I enjoy this work and have many years of experience conducting all types of program evaluation. I mention this only as a preface for my remaining comments because this data set is extraordinary in many ways.

The first way in which this data is extraordinary is the universal positive response from consumers. Typically, I see at least some percentage of responses that reflect overall dissatisfaction with a training experience (i.e., a waste of valuable time, resources, etc.). Not one person (n=2,266) provided a response that even approximated the common, overall negative comment. Wow!

Another way in which this data is extraordinary is that people enthusiastically described changes they intend to make in the way they work with their clients. Clearly, this conference made that elusive transition from theory to practice. As an educator, I know personally how difficult it is to positively affect daily practice. This conference did it! From the data, I am convinced that participants will both change their own lives and support positive changes in their clients' lives as a direct result of this training. Again, Wow!

Here are some examples of the kinds of overall comments people made about this conference:

Excellent teleconference!

This was the best teleconference I have been to.

June 23, 2003

The information is important in all health and school settings, not just WIC Clinics. Very good!

This is very educational and will keep staff motivated and increase skills for personal and professional developmental growth.

Healthy growth, not healthy weight! Thanks! Presentations were excellent!

Thank you for the training time today. I enjoyed every moment of it!

I appreciate when speakers give ideas on ways you can communicate growth without being judgmental. I like the actual words like “your child’s weight is getting ahead of himself.”

Very practical, proven ideas and information are greatly appreciated.

Excellent speakers—received some information that will be useful in the workplace.

Much improved since the last WIC teleconference.

Here is the final way in which this data is extraordinary. Out of the 2,266 completed conference evaluations, these are all of the suggestions for improvement. There are exactly 14 (again, out of 2,266), and one of those is specifically directed at the other evaluation form. There are only 13 suggestions for improvement. Yet another Wow! Here are those 14 suggestions.

The entire nursing and WIC staff need to see this videoconference.

To allow all the professionals in the clinic to watch this tape and take the education to their clients outside of the WIC office.

I found Pat Lyon’s insinuation that Native Americans were somehow different than “a group of teenagers” to be racist and offensive.

No times on the agenda? Not funny. I need times to plan breast pumping and bathroom breaks. I need times so I can miss as little as possible. Uncool.

Needed note paper for Carolyn Dunn’s last presentation.

June 23, 2003

I mailed in questions that were not directly answered. Being able to ask questions—we had no fax!

Audio was not very good at the site. We kept having breakups during the meeting (Fort Worth, TX).

Copies of the outlines or points made would have been better. Some were not included in the syllabus.

Provide written materials/scripts from the speakers at this videoconference (charts, graphs, lists, etc.) would be helpful.

How NOT to develop an evaluation form.

Whoever developed this evaluation form clearly does not understand them. It is not possible to rate “Discuss trends, effects, and solutions to watching too much television,” for example. (This comment was from Fit Kids Evaluation Form I, question 25.)

Too long!

I didn’t like the repeated video story segments.

In summary Dayle, it is obvious that this teleconference was a complete success, and in terms of participant satisfaction, far exceeded anything I have ever seen. I have been continually amazed by the overwhelmingly positive responses. Here’s my final Wow! Way to go!

Sincerely,

Kyle K. Colling, Ph.D.
Assistant Professor
Special Education, Counseling, Reading and Early Childhood
406-657-2056



What is the most meaningful thing that you will take to work from this videoconference?

Here's what people in Arkansas said:

A new approach to the practitioner/client relationship

To be less judgmental and work harder with clients to promote better nutrition, to promote and improve measures to increase physical activity for my clients and myself. Be more attentive to clients' needs.

Develop a personal relationship with the client and don't overload them all at once with paperwork and information.

Interacting with clients in a positive upbeat manner in order to achieve goals relating to weight, physical activity, breastfeeding and changes in behavior that directly relate and apply to these goals.

Useful ways to discuss issues and points that make them [clients] feel more welcome, friendly, and assure them they are doing a good job.

Listen, use persuasion, compassion, and some of the handouts to motivate change.

Use the time with clients as a chance for a positive experience, and thus greater success with the message I want the client to take home.

Have fun with clients and children. Ask mom questions instead of giving information that she may not read or use. Don't ask for a lot of changes at once.

Understanding how a small change here and there can make a huge difference later on.

Make clients more welcome to the clinic.

The positive change in emphasis in the WIC Program—shifting from treatment to health promotion.

A new approach to the parent/child feeding relationship

Allowing children more control over their diet.

The segment about infant feeding and healthy feeding habits will help me to assist my WIC clients, and also gave me useful information for my own 8-month old.

Improving parent child feeding relationship.

Encourage parents to allow children to decide when they are full but parents decide routine meals and snacks.

A new approach to healthy nutrition

It's not about limiting intake or foods but about adding new tastier foods to the menu.

The information for smart eating for a healthy weight seems most beneficial for me.

Increase water intake instead of fruit juice.

Different methods to incorporate nutrition education into teaching for parents and kids.

Positive attitude about nutrition.

A new approach to supporting physical activity

Exercise for all of us is FUN! Yarn balls and milk carton scoops to use in my office with WIC clients.

Encourage family activity. This will decrease TV and video game time.

Physical activity is play. Make it fun!

Exercise in any form is beneficial.

How to share with clients that healthy means being fit, not the shape of your body! I love this. Not enough people believe this.

A new approach to body weight

Health is not the size of the person.

The value of breast-feeding in reducing childhood obesity.

I understand how to communicate with parents of over and underweight kids.

The knowledge that children who may be too heavy on the growth chart may eventually even out.

Not to judge based upon a single graph plot point but to observe the overall continuum of growth.

Focus on child growth instead of weight.

With the change of the growth chart, I think the positive persuasion suggestions were very helpful when choosing how to bring up hard topics, such as dietary changes, that must be made with WIC clients and keep them coming back to clinic through five years.

Consistent growth up or down can be normal. Child will have set point on food intake.



What is the most meaningful thing that you will take to work from this videoconference?

Here's what people in Louisiana said:

A new approach to the practitioner/client relationship

How to be a persuasive person in counseling instead of just an educator.

A positive attitude about myself at the job.

Be positive and caring with clients. Tailoring counseling to individual and/or family so they in turn will be receptive and motivated to incorporate healthy lifestyles.

I can be effective in a short amount of time by focusing on small changes. The big picture will come together over time.

We are all in this together. It does not have to be hard to make changes. We can make changes we can live with. Small steps bring successes.

Remember that I need to establish a rapport with my client. Let them know that I care. Do not make them feel like I am criticizing them. Recognize that they are doing a good job.

Motivate more than educate.

Use emotion, relate childhood experiences, don't lecture, allow client to voice their feelings.

Listening to the client and letting them make decisions about what they need and want.

Learning the difference between persuasion and education.

A new approach to the parent/child feeding relationship

Letting baby or child decide how much to eat.

Letting the child set their own limits. Healthy feeding equals healthy growth.

Focus on evaluation of parenting skills regarding feeding relationships.

Infants and toddlers give signs of their hunger and also their satiety and we should respect and abide by these to yield good weight percentage.

The importance of the feeding relationship and the useful information about regular meals and snacks yet allowing the child to eat enough to be full.

How important it is for parents to take charge when it comes to good "choices" habits.

A new approach to healthy nutrition

The need for healthy eating for the whole family, but especially for kids.

Get children started right at birth by teaching mothers about nutrition. Eating well is not as expensive as you think.

To function as a change agent with methods to assist families in the area of nutrition.

Focusing on the positive rather than the negative. Educating parents/public of the long-term effects of an eating disorder.

Encouraging low fat, less sugar snacks.

Eat good foods to support your nutrition and support adequate growth.

Not to limit child's intake but to have scheduled meals and snacks.

A new approach to supporting physical activity

Increasing exercise by showing that it can be fun and enjoyable.

Make exercise fun and do several short periods throughout the day.

Fitness doesn't mean you have to go to a fitness center, or work out for an hour but can be done at anytime.

Making daily activity fun, turning off the TV and engaging in more physical activities.

Walk the talk, enjoyment vs. exercise.

Avoiding excess TV, and how it affects life/health, i.e., sedentary lifestyle, overeating while watching TV, lack of family communication.

A new approach to body weight.

Consistent growth, even if high or low on the growth charts, may be normal for the child.

Healthy growth with healthy food choices and activities.

How to approach a parent about an overweight child. Avoiding making parents feel guilty or upset. Offer suggestions.

A positive attitude toward healthy eating and lifestyle management.

Benefits of breastfeeding and how it affects weight.



What is the most meaningful thing that you will take to work from this videoconference?

Here's what people in New Mexico said:

A new approach to the practitioner/client relationship

How to be an effective agent in trying to come across to clients the importance and know-how to help with activities and mealtime at a young age

The psychology of behavior change.

Positive attitudes, inspiring people's spirits, better lives.

Empowering our clients, empowering children.

Using tools of persuasion to guide change.

Let someone know you care if you want them to care how much you know.

The way I approach clients and their issues. I have a better sense of how to make them feel more important and how to encourage change, no matter how small.

Accept ourselves for who we are. This will help our clients with their self-esteem.

Smile more. Lighten up!

A new approach to the parent/child feeding relationship

The most meaning that I will take to work is how I approach the client about obesity

It's all great and making changes in these relationships will later on result in healthier adults when these kids grow up

Stress to parents how important it is to focus on good feeding relationships.

To tell our clients to let their children decide how much to eat. Not to bribe the kids to eat dinner by offering rewards.

Children know when they are full and what and when they want to eat.

Making changes in the [feeding] relationship will later on result in healthier adults when these kids grow up.

Encourage family meals together.

Keeping families together and working on family values.

A new approach to healthy nutrition

New ways to teach and motivate clients to change eating.

More positive attitude and encouragement about healthy eating habits to the entire family.

No desserts and sweets after every dinner.

A new approach to supporting physical activity□

Every individual has a different body type, make a workout playful.

The importance of increasing family physical activity.

The encouraging tips on how to get parents and families involved in physical activity.

Ideas for incorporating physical activity throughout the day.

Incorporating short exercise periods during the day.

Encouraging physical activity within the public health scene.

How important physical activity is to the whole family.

A new approach to body weight

Positive body image!!! No matter how challenging this might be!!!

Approach to counseling moms when the child is overweight. Making small changes.

Let the client know that the TV and video games affect our children to gain weight.

Focusing on growth not weight to prevent obesity in children and adults.

That behavior change and overweight is a national problem and a great challenge for everyone. That it takes "little steps" to face the challenge.

Being more open-minded with regard to weight and families. Making small changes can make a big difference and the importance of positive reinforcement for all efforts by clients.

Every individual has a different body type, make a workout playful and also to try different kinds of healthy foods.

Obesity in children is a huge issue- my job is to be more supportive and understanding



What is the most meaningful thing that you will take to work from this videoconference?

Here's what people in Oklahoma said:

A new approach to the practitioner/client relationship

I like the term, change agent.

Client services are our business. Our attitudes impact our effectiveness and our credibility. Why would we not want to be a positive influence?

That good parenting means that we work ourselves out of the job.

The tools of influence—focus on them. Their [client] needs, desires, and concerns. Give them what is important to them. Be positive and not judgmental.

I will be more personal and fun when I'm interacting with clients. I want to help them buy into the intervention.

Blending the art of persuasion with clinical wisdom.

To put the clients needs first. To listen more to them.

Making my client feel welcome. Developing a more comfortable relationship with the client. Encouraging the client to share success stories.

Working together as a team with the parent, but letting the parent take the overall role and make the changes for her family as needed. Focus on particular issues and work on them slowly, then work toward better solutions, if needed.

A new approach to the parent/child feeding relationship

The importance of promoting positive feeding relationships focusing on growth, not weight, promoting breast feeding and encouraging regular family meals.

Parent and child bonding through regular, nutritious meals at the table.

Encouraging (empowering) parents to take charge and set limits with TV time and be in charge of what their children eat.

That the children do know how much is enough, but the parents can still give them different choices.

Let my child eat as much as she wants and stop demanding she "clean her plate" because I think she needs to eat all of it to be healthy and grow.

A new approach to healthy nutrition

Don't use the word "diet."

I learned a better way to discuss eating habits and how to approach parents about obese children.

It's important to be aware of what children are eating and when.

Learning how to change eating habits into positive experiences.

To help clients make better choices in healthy eating.

Learning how to choose healthier foods.

To make healthy choices through nutrition.

Good eating behaviors from birth to adulthood.

To be more confident in myself when giving nutrition information to clients.

A new approach to supporting physical activity

Importance of physical activity being viewed as play and not necessarily work.

Physical activity instead of TV, VCR, videos, and DVD's.

Get active. Focus more on activity than weight and calories.

Enjoyment vs. exercise. Activity vs. program.

Exercise can be enjoyed by doing playful or fun activities.

Exercise is extremely important. Any activity can be fun and enjoyable alone or with family. It does not have to be a rigid program that becomes boring or painful.

A new approach to body weight

Learned how to talk with parents about overweight.

Helpful, practical ideas about counseling children that are becoming overweight.

To focus on well being instead of weight.

You don't have to be skinny to be healthy and fit.

Focusing on health rather than body size or shape.



What is the most meaningful thing that you will take to work from this videoconference?

Here's what people in Texas said:

A new approach to the practitioner/client relationship

How to interact with parents to make positive changes

Be a friendly, persuasive agent of change.

My relationship with each client is unique and personal and everyone can benefit from each other's experiences to grow in positive directions.

Modeling healthy behaviors.

When I work with clients I will use more of the techniques recommended for motivating and inspiring them to make small, gradual changes for health.

Whether I work with WIC or not, I am a change agent. The key is, will I be one of influence? After this conference, I choose to be an effective change agent because healthy kids equal healthy families, equal healthy communities, equal healthy future for all.

The need for an emotional connection with clients before they can learn and want to change.

To be more friendly, persuasive, and influential.

Letting clients know how much I care and always ending my counseling sessions on a high note.

Be likeable. The personality talk really helped me because I was getting into a situation where my nutrition counseling was very boring and the same every time for every client.

A new approach to the parent/child feeding relationship

Parents have a strong influence on setting a positive feeding relationship.

Children can regulate the amount of food they need to eat.

Helping clients not force their children to eat everything from their plate but rather make it a pleasant, fun mealtime.

Getting a baby started right. Allowing myself to trust a baby in regard to his/her eating behavior.

A new approach to healthy nutrition

Good nutrition and how to explain to clients the importance of good nutrition and promote good eating habits.

Happy satisfied children eating healthy snacks and well balanced meals.

To put some love into your healthy, delicious and nutritious meals.

How to effectively and tactfully communicate with clients about nutritional needs and methods for improvement.

Encouraging and planning regular family meals.

Diets are not good.

Mealtimes being filled with fruits and vegetables and a balanced meal.

How to regulate weight without eliminating food.

A new approach to supporting physical activity

When talking to clients about exercise make it sound fun and enjoyable, not like something they don't have time for.

I am going to start exercising more. Starting today.

Take action, promote physical activities, such as a brisk walk, time well spent with clients promoting time spent with family enjoying different physical activities, and not making it strenuous.

Encouraging more physical activity. I think I make too many excuses about exercising or physical activity. After attending this teleconference, I no longer have excuses because my family and I can do physical activities at home in the living room.

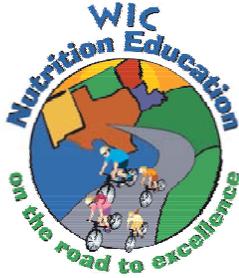
A new approach to body weight

Opened my mind and increased my knowledge about obesity in children.

More delicate ways of discussing weight with parents, i.e., getting ahead instead of overweight/obese.

Teaching parents that restricting food can actually make children become more overweight.

As a person who is somewhat uncomfortable talking to parents about their child's weight problems, I now feel I have more knowledge and better techniques to present to parents.



What additional information or training would help you promote the concepts of healthy weights for children and families? (All responses)

Staff training 659

Personal wellness 695

Written materials for clients and clinics 1,338

- *Provide written materials/scripts from the speakers at this videoconference (charts, graphs, lists, etc.) would be helpful.*
- *We feel we need materials for our clients to use...*
- *We really have problems with materials due to budget cuts. We can't order or copy.*
- *Materials for promoting this concept because our current material does not fully promote this.*
- *Colorful posters for clinic, and videos, low-literacy brochures.*
- *Videos that parents can view showing different family activities. Play exercise, dance exercise and nutrition using cultural music.*
- *Video for parents showing age-specific milestones that address growth, acceptable variants of the means of growth charts, dispel myths, encourage feeding relationship, and long-running so it doesn't have to be manned by staff.*
- *Educational videos for parents and other clients to view.*
- *We do not get good educational materials [to hand out] unless it is for a breastfeeding mom. Other people are important. Not just breastfeeding moms.*
- *We don't have good material on any of these topics! Especially the toddler feeding.*
- *More information and pamphlets (reproducible) in English and Spanish on obesity, activities, and TV.*
- *Handouts that are quick.*
- *The materials encouraging physical activities at various ages would be useful.*
- *Web sites where information is available also resources for effective program materials/curriculum.*
- *Dyna-band would be a nice motivational tool for our WIC clients.*
- *Provide exercise bands (like the ones we received in our materials) for our clients.*
- *In our class play activity, we were given jump ropes, which I think were a very good idea to increase physical activity in children. Maybe a hula or balls or some other materials for clients would be good, too.*
- *We feel we need more training on including physical activity into daily life...*

- *Incorporating physical activity into the workday schedule.*
- *May want to have a WIC session on exercise and use Dyna-bands right in class along with chair exercises. Also make sure WIC participants know how TV influences their social and physical health.*
- *More referrals or resources on how the parents can get involved with activities while parents work, are single, and low income. Cannot afford to do the different activities.*
- *Physical activities at school.*
- *Physical fitness class after work for staff and/or client who wish to participate. Physical fitness classes to be added to core classes for clients (parents and children).*
- *Ideas on other types of activities to do at home that involve physical activity, fun easy artistic activities.*
- *How to have more activities for children in the WIC office.*
- *More samples and concept ideas like the Dyna-band.*
- *We feel we need more training on nutrition...*
- *More about eating five a day the color way.*
- *Lessons for showcasing activities for children and infants geared to children and parents.*
- *I would love to see more specific information about eating healthy, such as a recipe book or more ideas about the meal planning.*
- *More information on causes and effects of being overweight and how to stay away from non healthy foods (like fast food restaurants).*
- *Cooking classes with recipes presented to clients and staff.*
- *We feel we also need training on these areas...*
- *Tools for motivation.*
- *The three levels of counseling (Satter).*
- *Very interested in the primary, secondary, and tertiary training that NM is doing with (Satter).*
- *Training for WCS's and CPS's on how to counsel appropriately.*
- *A whole conference on growth chart to BMI interpretation would be great.*
- *Role-play conversations with families regarding weight issues.*
- *Additional training that would help me promote the concept of healthy weights for children and families.*



For next time, these are ALL the suggestions for improvement in 2,266 evaluations:

The entire nursing and WIC staff need to see this videoconference.

To allow all professionals in the clinic to watch this tape and take the education to their clients outside of the WIC office.

Provide continuing education credits for non-nutritionists.

I found Pat Lyon's insinuation that Native Americans were somehow different than "a group of teenagers" to be racist and offensive.

No times on the agenda? Not funny. I need times to plan breast pumping and bathroom breaks. I need times so I can miss as little as possible. Uncoil.

Needed note paper for Carolyn Dunn's last presentation.

I mailed in questions that were not directly answered. Being able to ask questions—we had no fax!

Audio was not very good at the site. We kept having breakings during the meeting (Fort Worth, TX)

Copies of the outlines or points made would have been better. Some were not included in the syllabus.

Provide written materials/scripts from the speakers at this videoconference (charts, graphs, lists, etc. would be helpful)

How NOT to develop an evaluation form.

Whoever developed this evaluation form clearly does not understand them. It is not possible to rate "Discuss trends, effects, and solutions to watching too much television," for example