

Nutrition Education

- I. The goals of WIC nutrition education are to:
 - a. Emphasize the relationship between nutrition, physical activity, and health with special emphasis on the nutritional needs of pregnant, postpartum, and breastfeeding women, infants and children under five years of age
 - b. Assist the individual who is at nutritional risk in achieving a positive change in dietary and physical activity habits.
 - c. Improve nutritional status and prevent nutrition-related problems through optimal use of the WIC supplemental foods and other nutritious foods.
 - d. Raise awareness about the dangers of using drugs and other harmful substances during pregnancy and while breastfeeding.

- II. Provide appropriate nutrition education and encourage participants to set goals.
 - a. CPAs should use the VENA approach to conduct a thorough nutrition assessment during each appointment. This assessment will guide the nutrition education provided during the appointment and help the participant set a specific, measurable, achievable, relevant, and time based (S.M.A.R.T.) goal.
 - b. Consider the participant's WIC category, level of nutrition risk (low or high), nutrition education needs, and goals when providing nutrition education.
 - c. The participant must create the goal(s)–with the help of the CPA if needed. The goal(s) must be individualized to the participants' needs and relevant to their personal situation
 - d. CPAs must document the participant's goal(s) in VISION Documentation should include:
 - i. Specific and measurable details of the goal(s).
 - ii. Actions and/or steps for completion of the goal(s).

- iii. Time frame for completion of the goal(s).
 - e. CPAs must follow up on the participants' documented previous goal(s) during subsequent WIC appointments.
 - f. CPAs must document if the participant declines goal setting.
 - g. See "VENA Module" training for additional information on the goal setting process.
- III. Nutrition education contact requirements.
- a. Nutrition education contacts can be completed in-person or virtually in one of the following ways:
 - i. One-on-one education
 - ii. Group education
 - iii. Bulletin board class
 - iv. Self-paced module
 - v. Online module (wichealth.org or other)
 - vi. Other as approved by both state and local agency
 - b. At least 2 nutrition education contacts must be offered to all WIC participants, their parent or guardian, or proxy during each certification period less than 6 months.
 - c. Nutrition education contacts must be offered quarterly for all participants certified for a period greater than or equal to 6 months.
 - i. The first nutrition education contact is usually individual nutrition education provided by the CPA during the certification process.
 - ii. Subsequent nutrition education contact(s) include either individual or group nutrition education. This will depend on the participant's needs and risk status.
 - d. All nutrition education contacts must be documented in VISION in the "Nutrition Education" screen.
 - e. Each CPA should use professional judgement and follow local agency guidance when scheduling nutrition education contacts.

- f. State developed nutrition classes are available on SharePoint in facilitated discussion, bulletin board, self-paced and web-based formats for use and guidance. Additional nutrition education materials are also available on SharePoint for use and guidance.
 - g. If a participant is reluctant to complete nutrition education, consider the following suggestions:
 - i. Reassess the scheduled education (i.e. Does it meet the participant's need and schedule?)
 - ii. Reschedule to meet the participant's needs;
 - iii. Issue one month's benefits and schedule the following month's appointment for nutrition education.
 - iv. Gently remind the participant that nutrition education is a requirement of the WIC Program.
 - h. Participants cannot be denied supplemental foods for failure to attend or participate in nutrition education activities.
- IV. Nutrition education must be documented in VISION.
- a. In "Clinic Services", expand the "Education and Care" branch. Open the "Nutrition Education" screen. You will see a collapsed list of topics for "Nutrition Education Covered" and "Pamphlets Provided". Select education and materials provided here.
 - b. Topics selected under "Nutrition Education Covered" and "Pamphlets Provided" will appear in the "Counseling/Plan" section of the participant's Care Plan.
- V. Breastfeeding Education for WIC Participants.
- a. Refer to the "BF Counseling" P&P document.
- VI. People experiencing homelessness may have unique needs. Each local agency will determine how to provide nutrition education to these individuals based on the VENA process and their clinic setting.
- VII. Nutrition education must consider the participant's nutrition needs/interests, household situation, religious and cultural values, language spoken and literacy level.

- a. It is recommended that the literacy level of the nutrition education materials should be no higher than the 6th-8th grade reading level.
- b. Since many WIC participants have limited literacy, the 4th-5th grade reading level is more ideal for WIC reading materials.

VIII. Prioritize nutrition education using critical thinking skills, professional judgment and the participant's expressed needs and concerns if more than one member of the family is enrolled in WIC. Effective nutrition education should incorporate the following elements:

- a. A review or summary of the WIC nutrition assessment to ensure the participant's nutrition risks, needs and concerns have been heard and understood.
- b. Messages and interventions that engage and empower the participant to set SMART goals (see "VENA Module" training for more information on setting SMART goals).
- c. Provide "how to" support to assist the participant in setting and accomplishing goals as needed.
- d. Appropriate counseling methods/teaching strategies (see "VENA Module" training).
- e. A delivery medium that creates opportunities for participant interaction and feedback. Encourage the participant to participate. You may decide to role play, discuss a scenario, offer a quiz, etc.
- f. Appropriate support (referral programs, etc.).
- g. Follow up to assess for behavior change and determine intervention effectiveness. This may be done at the next WIC appointment, or you may plan to follow up with the participant sooner if needed.

IX. Quick WIC Tips (Exit counseling)

- a. Quick WIC Tips (Exit counseling) is a counseling topic and handout to be given to each woman whose categorical participation in the WIC program is ending. The purpose of this handout, along with counseling on next

steps, is to reinforce the important health messages provided by the WIC Program. It is not meant to replace individualized nutrition education.

- i. An additional appointment is not necessary to provide this education. It can be incorporated into other appointments.
- ii. Exit counseling must still be provided to a pregnant woman who is planning on recertifying after her delivery. If she received exit counseling at the end of her pregnancy and recertified as postpartum or breastfeeding, an abbreviated exit counseling session may be offered at the end of her postpartum certification.

b. Quick WIC Tips (Exit Counseling) includes the following messages:

- i. Healthy diet
- ii. Continued breastfeeding, if appropriate
- iii. Immunizations
- iv. Dental Health
- v. Health risks of alcohol, tobacco, and drugs
- vi. Importance of folic acid

c. This education must be documented in the participant's record by checking the topic "Quick WIC Tips/Exit Counseling" in the Nutrition Education screen. In the Pamphlets Provided section, check "Quick WIC Tips" if the handout is issued to the participant.

X. Nutrition Education Created by Local Agencies.

a. Local agencies may create their own nutrition education materials, including classes, handouts, bulletin boards, self-paced modules, etc.

When developing nutrition education classes, please consider:

- i. the needs of clinic populations; choose topics that address these needs.
- ii. various household situations
- iii. various religious and cultural values
- iv. literacy level
- v. readability (graphic design, color choices, font, white space, etc.)

b. Videos approved by the state nutrition team may be used as a class. Videos may also be used in conjunction with a class.

- c. Sources used to create nutrition education materials must be referenced appropriately.
- d. Nutrition education classes must be written in a traditional lesson plan format before submission to the state RD over nutrition education. This will include:
 - i. Topic and title.
 - ii. Goal(s) and measurable objectives.
 - iii. List of needed materials.
 - iv. Content
 - v. Learning activities.
 - vi. References.
- e. The local agency nutrition coordinator must review all nutrition materials created by local staff and submit to the state RD over nutrition education (if unavailable, to any state RD) at least two weeks prior to implementation for review and approval. Electronic submission is strongly preferred (e-mail).
- f. Nutrition education materials from USDA, FNS, and other federal health and nutrition programs, such as SNAP or EFNEP, may be used locally after approval by the local agency nutrition coordinator.
 - i. Nutrition education materials from other sources must be reviewed by the local agency nutrition coordinator and submitted to the state RD over nutrition education for approval prior to use.

XI. Nutrition Education Committee (NEC)

- a. Each fiscal year (October 1), the president of the Utah Association of WIC Administrators (UAWA) shall provide recommendations of local staff who can serve on this committee to the state RD over nutrition education.
- b. The Nutrition Education Committee (NEC) will meet as needed – at least quarterly. Meetings will be held virtually.
- c. Local staff on this committee may not serve more than two consecutive years to ensure a diverse and varied committee composition.

- d. The nutrition education materials that are identified, developed or revised shall be culturally sensitive, based on current evidence and acceptable to the Utah WIC population.