Meet the 2011 Texas WIC Dietetic Interns
As we close out the fiscal year, we review some of the exciting trends and transitions from the past months, and look to those that will help propel us into future successes next year.

As always, a new fiscal year welcomes new WIC Approved Foods. We’re as excited as WIC moms about a trendy new addition to our approved foods: mixed baby fruits and vegetables are now allowed! See page 6 for all the details. On pages 8–9, get an introduction to the development of the new Texas Integrated Network (TXIN), which will replace WIN to streamline clinic processing and services for our participants.

Collaboration has been an important trend for WIC this year. On pages 4–5, see how WIC worked with the USDA, the Texas Department of Agriculture, and the West Texas Food Bank in the “Summer Nutrition Card” pilot project, which aims to reduce food insecurity for El Paso families. Since our WIC clinics see about 45 percent of all pregnant women in Texas, we have a unique opportunity to educate and empower our participants on the importance of having a healthy pregnancy. On page 7, read about WIC’s collaboration with other community partners in the “Healthy Texas Babies Initiative” — a multi-organizational, statewide effort to reduce infant mortality in Texas.

It’s our job to stay on top of nutrition and health trends for our clients, and in this issue of Texas WIC News we’re happy to introduce the “RD Corner,” a column designed to help WIC’s registered dietitians keep up with the latest in nutrition and health behavior research. All our staff can stay informed about “hot” nutrition topics by checking out the wrap ups of three of this year’s most important nutrition conferences on pages 11–13.

Finally, we celebrate lots of transitions as we head toward the year’s end. The 2011 Texas WIC Dietetic Internship graduates reflect on their past year and future successes beginning on page 14, and the WIC state office saw a shift change this year as several longtime WIC employees retired. We commemorate their hard work and wish them well on pages 17–19.

Each year inevitably brings new trends and transitions, and the success of the WIC program depends on staff staying flexible, engaged, and open to the changes that come our way. I’m amazed and proud of how WIC staff continues to grow and evolve, and look forward to even more progress into 2012.
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The Summer Nutrition Card

by Angela Gil, R.D., L.D.
Nutrition Education Consultant

Many families with school-aged children who are struggling to provide wholesome meals during these times of rising food and gas prices rely on the National School Lunch and School Breakfast Program to provide to their children healthy meals that they may not otherwise get at home during the school year. But what happens once school is out for the summer and the children are at home? The Summer Food Service Program can help fill that nutrition gap by making sure children still receive those healthy meals. Historically, however, participation has been low and many families are not taking advantage of this benefit because there is limited access to the program, especially in rural areas.

Summer Nutrition Card Pilot

So what is the U.S. Department of Agriculture doing to increase access and participation? USDA provided funding to five pilot programs in the nation to look at different ways to feed children healthy food over the summer months. The Texas Department of Agriculture was selected to administer one of these pilots along with the Department of State Health Services. The Summer Electronic Benefits Transfer for Children (SEBTC), known as the Summer Nutrition Card Pilot to clients, used the WIC EBT technology to load EBT cards with the same foods that are currently available to WIC participants. The Ysleta Independent School District in El Paso was chosen as the demonstration site. The West Texas Food Bank in El Paso was chosen to distribute the loaded EBT cards to the families and train them on how to use the card and shop for the foods. The state WIC staff was responsible for developing participant materials specifically for the summer program, developing a train-the-trainer program for the West Texas Food Bank, loading the EBT cards with WIC...
The West Texas Food Bank held a kick-off event for the Summer Nutrition Card Pilot.

About 2,500 children ages 5 to 18 were randomly chosen to receive the food benefits in the pilot. The West Texas Food Bank conducted more than 10 training sessions to teach the families selected for the Summer Nutrition Card Pilot how to shop and use the card. A special WIC food package was tailored to meet the needs of the K–12 population. It included the same foods that are in the standard child WIC food package plus canned fish. The card was made available only during the summer months beginning on June 1 and ending on August 21.

The pilot was closely monitored by a third party to determine if this is a program that can be implemented across the nation in the future. A total of 1,125 families picked up their cards, and after only three weeks into the program, there were $56,479 in redemptions. Rufus Graham, from the West Texas Food Bank, said, “Many participants stated that because of this program, they feel more secure about their food security for the summer. Some had tears in their eyes when they spoke to us and were very grateful to have been chosen. We found that many left our program and immediately went to their local store to purchase food for their children. All were commenting on how much this program is going to help the family get through the summer.”

The Summer Nutrition Card Pilot is just one of several ways USDA is demonstrating its commitment to children and helping to end childhood hunger.
New WIC Approved Foods

by Paula Kanter, R.D.
Nutrition Specialist

The new fiscal year always brings changes to WIC approved foods.

Baby Fruits and Vegetables

This year several changes designed to increase baby food redemption rates have been made to baby fruits and vegetables. Starting October 1, 2011, mixed baby fruits and vegetables will be allowed.

Several of the new combination flavors include:

- Apple Blueberry
- Strawberry Banana
- Apples & Bananas
- Apple, Mango & Kiwi
- Apple, Mango & Carrot
- Apricots with Pears & Apples
- Corn & Sweet Potatoes
- Sweet Potatoes & Apples
- Mixed Vegetables

Beechnut is introducing a new Beechnut Stage 2½ in a 4 ounce jar for older babies. The Stage 2½ is a thicker texture like the Stage 3 product and there are tiny pieces as well for added texture for the baby.

The flavors for Stage 2½ will be limited to about half of the flavors of the Stage 2 but will be a nice alternative for parents.

Breakfast Cereals

New cereals for FY 2012 include:

- General Mills MultiGrain Cheerios – 36 oz
- Kellogg’s Frosted Mini Wheats Touch of Fruit in the Middle – 18 oz
- Kellogg’s Special K – 18 oz
- Malt-O-Meal Blueberry Mini Spooners – 18 oz and 36 oz
- Malt-O-Meal Crispy Rice – 18 oz and 36 oz
- Quaker Instant Grits – 18 oz and 36 oz
- Quaker Life – 18 oz

The gluten free cereal, Kellogg’s Gluten Free Rice Krispies 18 ounce box, has been added. Plus, a few new brands of whole grains and canned beans appear on the list. Soy milk options will include 8th Continent vanilla flavor.

We hope all these additions to the WIC approved foods have a positive impact on the purchasing patterns of our WIC participants this coming fiscal year.
Healthy Texas Babies Initiative

by Matt Harrington, M.S., R.D.
Nutrition Education Coordinator

Under the leadership of Dr. David Lakey, commissioner of the Texas Department of State Health Services (DSHS), a panel of over 40 maternal and child health experts convened in Austin, January 2011, to provide advice, recommendations, and support to the Healthy Texas Babies (HTB) initiative sponsored by DSHS. The purpose of the HTB expert panel meeting was to begin development of a coordinated plan to reduce infant mortality in Texas.

At the conclusion of the two-day meeting, the expert panel made several key recommendations for the Healthy Texas Babies initiative:

- Reducing infant mortality should be a priority for Texas.
- Activities should be patient-centered with a focus on long-term goals.
- Any coordinated plan to reduce infant mortality should be data driven and evidence-based.
- Consideration should be given to creating a multi-disciplined, multi-agency/organization coalition to oversee a Texas plan to reduce infant mortality.
- Strong consideration should be given to addressing systemic issues in addition to supporting new interventions.
- There is a need to strengthen current partnerships and create new ones.
- Support for this effort should be focused broadly across the life course but with identification of short, intermediate and long-term goals and objectives.
- Effective communication about the coordinated effort to reduce infant mortality in Texas is critical for parents, providers, clinicians, stakeholders, policy makers and the public.

**Infant Mortality in Texas**

Infant mortality is the death, within the first year of life, of any infant born alive. In the United States, the infant mortality rate has declined over the past few decades, from 20 infant deaths per 1,000 live births in 1970 to about 7 deaths per 1,000 live births in 2002. However, the United States still ranked 27th among industrialized nations in infant mortality in 2000. In 2008, the infant mortality rate for Texas was 6.1 deaths per 1,000 live births.

The leading causes of infant mortality in Texas are birth defects, disorders related to preterm birth and low birth weight, sudden infant death syndrome (SIDS), and maternal complications. Risk factors for infant mortality include no prenatal care, smoking, inadequate weight gain during pregnancy, and having a repeat pregnancy within six months or less.

**What Can WIC Do?**

WIC serves about 45% of all pregnant women in Texas and is in an optimal position to address many of the recommendations of the expert panel.

*Early prenatal care:* WIC provides referrals to health care providers immediately if they are not receiving care.

*Reduction of birth defects:* WIC provides client-centered nutrition education on the benefits of folic acid and dangers of substance abuse.

*Strengthen and create partnerships:* WIC is partnering with March of Dimes to promote *Healthy Babies are Worth the Wait*, an initiative to reduce preventable preterm births and reduce the number of elective C-sections.

References:


OPDS. 2008
TXIN to Replace the WIN System

by Renee Mims
Contributing Editor

WIC will upgrade and dramatically expand its on-line services and management as plans begin to design the new Texas Integrated Network (TXIN).

“As our vision of the new system unfolds, we imagine a system that would provide improved customer service, quick responses to changing regulations, improved availability of data, and an enhanced ability to handle electronic benefit transfer data,” Karen Clements, branch manager of program development and process improvement, said. “The new system will be virtually paperless with easy-to-follow computer screens that will help improve clinic flow.”

TXIN (pronounced Texin) will replace WIN, the current clinic processing system. The WIN system was originally launched in 1995.

“The timeline will not be finalized until we hire a design, development and implementation vendor and begin to negotiate a contract,” Clements said.

The new system must meet U.S. Department of Agriculture’s Food Nutrition Services requirements for management information systems, electronic benefits transfer delivery, and accountability for client benefits. The new system will:

- Offer a web-based comprehensive clinic and participant management system.
- Offer a robust client scheduling system.
- Plot infant and child growth charts and pregnancy weight gain grids.
- Calculate body mass index (BMI).
- Tailor participant food packages to meet specific client nutritional risk needs.
- Offer a complete client history to support improvements in measures of outcome and accountability.
- Develop automated high risk individual client care plans.
Contest winner announced...

After receiving over 100 of entries from across Texas, Reymundo “Rey” Garza was chosen as the winner of the “Name That System” contest for his entry, “TXIN,” to replace WIC’s current support system, WIN.

Garza of Brownsville works for LA 003 as a phone bank receptionist. He prides himself on customer service and embraces WIC’s mission. A dedicated vegetarian, wellness site coordinator and supportive dad, Garza enjoys spending time with his 2-year-old daughter, Audrey, and with his wife, Cristal.

For his creativity, he won a $25 VISA gift card and a certificate of recognition signed by Karen Clements, program manager, Program Development and Process Improvement, and Theresa Bradley, WIN Evolution project manager.

Reymundo Garza receives his certificate of recognition from his supervisor, Sandra Gardner.

- Connect service delivery systems between Texas Department of State Health Services and Immunization, SNAP/TANF Programs, Medicaid, etc.
- Improve data communication between the state agency and clinics to resolve issues with client transfers.
- Utilize current technology and support.
- Offer paperless office environment to the extent possible.
- Network mobile site environments (laptops).
- Improve client nutrition education through the support of internet access and integrated online nutrition education offerings.
- Improve reporting capabilities.
- Calculate income eligibility.
- Enhance nutrition/health surveillance and support for referrals.
- Strengthen audit trails, quality assurance, fraud prevention and detection.
- Expand access channels for participants to interact with the Texas WIC Program.
- Improve processes for food redemption, settlement and reconciliation.

“Our goal was to look beyond the best solutions currently available,” Clements said. “We want more than a ‘state-of-the-art’ system — we want to raise the standard so that future systems would be modeled after ours!”

The ultimate goal of the new system is to make a process that provides easier, faster, and more streamlined services for participants and clinics.

“This new system will impact our participants daily lives by changing to a system not bound to telephone, paper communication or even a ‘brick and mortar’ service delivery format,” Clements said. “This is just one step closer to being able to adapt quickly and efficiently to meet the ever changing business of WIC.”
Texas WIC News is adding a new column for WIC dietitians. The articles in this column will provide information on nutrition-related topics, issues, and research designed for the registered dietitian in the WIC clinic. This introductory column is directed to all staff to highlight the benefits of having a registered dietitian available within the clinic setting.

The registered dietitian functions in various roles in the clinic, depending on the size and needs of the local agency. Local agency directors have designed organizational charts to maximize staff functions, and they are faced with financial limitations when they make those decisions. So, while some RDs may be able to provide one-on-one counseling to WIC participants, others are responsible for quality assurance, approving formula issuance, high risk counseling, and conducting client-centered nutrition education classes.

It is time to market the WIC dietitian. Participants need to be aware that nutrition consultants are available to them, and that they can request an appointment for a counseling session with a registered dietitian. Think about it. How many people have the opportunity or money to have a nutrition assessment and individualized counseling with an RD? We need to help people understand the impact of what WIC offers.

Registered dietitians can also provide assistance with staff nutrition issues in most clinics. The RD can help by providing low-intensity interventions to help with weight loss and diet improvements. As you have seen in numerous WIC Wellness Works articles, improvement within the clinic affects the entire clinic, ultimately impacting the participants. And, that is another positive marketing strategy.

WIC is a nutrition program and the identification of nutritional risk is an eligibility requirement. As we speed toward electronic solutions to move participants through the system in an efficient manner, we do not want to lose sight of the importance of the visual nutrition assessment. Your RD should teach staff basics on visual nutrition assessments. The tactile evaluation from a touch on skin; the visual evaluation of healthy nutrition markers like hair, skin, eyes, nails, and teeth; and even the smells are an on-sight evaluation. These pieces contribute to nutrition assessment as a whole, and can be used to determine referrals to the RD.

The state office plans to continue to serve as a resource for the clinic RD and provide training opportunities to enhance assessment and counseling skills. Comments or requests on topics and subject matter for future articles are encouraged.
A good night’s sleep: One of the best things you can do for your health!

How much sleep do we need each night? While there’s no magic number, the answer for most adults lies somewhere between seven to nine hours. This probably doesn’t come as news to most of us, particularly when we’re getting less than we need and often feel exhausted. There are some energetic individuals out there who sleep less than seven hours a night and seem to fare just fine, but research indicates only about five percent of the population can regularly get less than seven hours sleep a night without serious consequences. Research over the last decade indicates that after even a day or two of sleep deprivation, our mental function becomes impaired. Memory fails, concentration suffers, response time slows, mood swings, and problem solving skills flounder.

Lack of sleep over a short time period can result in:
- An increased risk of motor vehicle accidents.
- A larger number of performance errors at work and at home.
- A decreased ability to focus, react to signals, or remember information.
- Reduced ability to control mood and emotional response to situations at work and at home.

Lack of sleep over a long period of time can result in:
- An increased risk of diabetes and heart problems.
- An increased risk for mental health conditions including depression and substance abuse.
- Slowed metabolic function, which can result in weight gain.

The Sleep Deficit–Weight Connection

Research over several years has drawn powerful connections between weight gain and sleep deprivation. Lack of sleep tricks your body into being hungrier and interferes with your body’s ability to know when to stop eating. Ghrelin is a hormone that signals your body that you are hungry and tells you when to eat. When you are sleep deprived, you produce more ghrelin. This is the body’s way of decreasing fatigue, by signaling the body to eat for energy. Leptin is a hormone that tells you to stop eating. When you’re sleep deprived, you have less leptin. Your body is getting the message to eat more, plus your metabolism has slowed down in order to conserve the limited energy that you have. So lack of sleep adds up to a vicious cycle: increased hunger, weight gain, a slower metabolism, fatigue that affects the motivation and ability to exercise, and difficulty shedding the extra pounds.

(continued on WIC Wellness Works - Insert D)
Moving Forward

Eric Charles has always been, as he puts it, “wired for motion.” A nutritionist for Irving WIC and a member of the WIC Wellness Works program, Eric could be perceived as a kind of fitness superhero. After all, he has run a 26 mile marathon — barefoot. For those of us struggling to run at all (as in, around the block), the idea of someone running that far and without shoes on is awe inspiring and pretty intimidating. Part of what has helped Eric stay active is realizing how much movement reduces his stress, increases his confidence, and builds his positive outlook on life.

But, like most of us, Eric has struggled through long periods of inactivity, lack of motivation, and loss of direction. “For about a two-year time period,” Eric explained, “I didn’t have any motivation. I would try to get something started, train for a race — and I just couldn’t get the motivation for it.”

After the end of an important relationship, Eric decided to start running again. He did it as much for his mind as for his body. In 2008, Eric set a goal of running the Cowtown Half Marathon in Fort Worth.

Eric moved from anger to acceptance during that race. “At 8 am, I crossed the five-mile mark of the marathon. I was running out of energy and tried to tap into that anger that had fueled my training; it wasn’t there anymore. I realized I was out of gas, but I was also incredibly relieved because that burden in my life was lifted from me. I was no longer angry. I had literally run through it; I passed through depression and anger into acceptance. Whenever reminded of that negative experience, I had the finisher’s medal to remind me that I got through it.” Not only did he “run through” his sadness and anger, but he also found his confidence again.

Although most of us probably wouldn’t take on the kind of physical challenges that Eric has, all levels of movement can reduce stress and improve coping ability. For Eric, running helps him manage the day’s ups and downs both at home and at work, and is well worth the investment of his time and energy.

If you’d like to move more throughout your day, Eric suggests finding a focus, something you enjoy like walking outdoors or taking a dance class. Then, he said, break your goal into smaller pieces. When he feels his energy flagging he tells himself, “Just make it to the stop sign, or… just go a little further to the trees” and that makes larger goals more manageable. “Whatever you plan for,” Eric said. “Break it down into smaller steps.”
Finally, Eric said that the hardest thing about getting started can be managing the impulse to quit early on in the process. “Sometimes, the most important battle is against yourself and the desire to stop. You’ve got to fight your own want to quit.” To do that, Eric suggests keeping your eyes forward. Even if you’ve had a rough day or an experience that feels like a failure, “remind yourself that there’s a next time,” Eric said. “There’s always an opportunity to look ahead and think of how you’re going to do better next time.”

Whether it’s a walk around the block or running a marathon, the results can be powerful. When you are moving forward in reducing stress and bettering your life, you’ll realize every step of the way you can meet your goals in life.

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**recipe**

**Score a touchdown during a tailgate outing with this healthy layered bean dip.**

**Southwestern Layered Bean Dip**

http://www.eatingwell.com/recipes/southwestern_layered_bean_dip.html

**Ingredients**

- 1 16-ounce can nonfat refried beans, preferably “spicy”
- 1 15-ounce can black beans, rinsed
- 4 scallions, sliced
- ½ cup prepared salsa
- ½ teaspoon ground cumin
- ½ teaspoon chili powder
- ¼ cup pickled jalapeño slices, chopped
- 1 cup shredded Monterey Jack or cheddar cheese
- ½ cup reduced-fat sour cream
- 1 ½ cups chopped romaine lettuce
- 1 medium tomato, chopped
- 1 medium avocado, chopped
- ¼ cup canned sliced black olives, (optional)

**Preparation**

1. Combine refried beans, black beans, scallions, salsa, cumin, chili powder and jalapeños in a medium bowl. Transfer to a shallow 2-quart microwave-safe dish; sprinkle with cheese.
2. Microwave on high until the cheese is melted and the beans are hot, 3 to 5 minutes.
3. Spread sour cream evenly over the hot bean mixture, then scatter with lettuce, tomato, avocado and olives (if desired).

**Tips & Notes**

Make ahead tip: Prepare through step 1, cover and refrigerate for up to 1 day. To serve, continue with steps 2 and 3.

**Nutrition Per serving:** 146 calories; 7g fat (3g sat, 3g mono); 12mg cholesterol; 15g carbohydrates; 7g protein; 5g fiber; 288mg sodium; 164mg potassium.
A Good Night’s Sleep!
(continued from WIC Wellness Works - Insert A)

What You Can Do

To build sleep habits that will support a healthier lifestyle, start by reflecting on your personal needs and habits. Assess how you respond to different amounts of sleep. Pay attention to your mood, energy, thinking ability, and how your body feels after a poor night’s sleep versus a good one. Try to pinpoint how many hours a night are optimal for you. Then, utilize the following sleep tips and see if the quality and duration of your sleep improves:

- Relax. About an hour before you go to sleep, do something you find soothing (read lighthearted material in bed, take a warm bath, listen to soft music).
- Avoid getting “riled up.” Two hours before bed, avoid any negative or over-stimulating activity (upsetting television programs or reading material, stimulating conversations, etc.).
- Create a sleep environment that is quiet, comfortable, and cool (most adults sleep best when the temperature is 65–69 degrees).
- Keep your room as dark as possible with room-darkening shades or curtains or wear a sleep mask. Even a small amount of light in the room can throw off your body’s sleep-wake cycle.
- Sleep on a comfortable mattress, pillows, and bedding. Consider adding a cushy mattress pad or finding a more comfortable pillow.
- Establish consistent sleep and wake schedules, even on weekends.
- Finish eating at least 2–3 hours before your regular bedtime. Make your last meal something that will sustain you so you don’t go to bed hungry.
- Avoid drinking more than a few ounces of anything right before bed, and make sure to stop caffeine and alcohol products at least three hours before bedtime.
- Understand the side effects of your medication. Certain medications can affect sleep. Be aware of your body’s response to what you’re taking and talk with your doctor if needed.
- Exercise regularly during the day or at least a few hours before bedtime.
- Use aids to mask light and sound. If sleep-disturbing sound or light can’t be helped in your home, consider sleep aids like earplugs or a sleep mask.
- Sleep with a snorer? Use your resources. If you sleep with someone who snores, don’t try to ignore it. Explore tips offered online by sites like www.webmd.com or www.mayoclinic.com, or get medical advice from a doctor.
- Don’t push it. If you don’t fall asleep within 15 to 20 minutes, get up and do something calming for a little while. Pressuring yourself to fall asleep can result in stress, which prevents sleep.

If you try the above tips and are still experiencing sleepiness during the day, consult your physician to determine the underlying cause. You might consider keeping a sleep log to track your habits over a one- or two-week period. Note any accompanying symptoms like restless legs or difficulty breathing during sleep and discuss these with your doctor. Identifying and treating the cause of your sleep disturbance can help put you on your way to a good night’s sleep.

Most importantly, make sleep a top priority. Regularly getting the sleep your body needs is one of the single best things you can do for your health today, and for your future.
Each year, Baylor College of Medicine and Texas Children's Hospital sponsor a neonatal nutrition conference. This year's Neonatal Nutrition Conference was held in Houston, March 6-9. Physicians, pharmacists, dietitians, nurses and other health care professionals were in attendance. The conference objectives included defining neonatal growth nutrition requirements, identifying specific nutrition problems associated with low birth weight and premature infants, and naming ways to serve the nutritional concerns of the premature infants after hospital discharge.

Because neonatal nutrition knowledge continues to advance, presenters shared their most up-to-date information on caring for the preterm infants. Presentations varied from the premature gastric development, to specific nutrient and nutrition needs of the premature infant and how to support the family during these stressful times. Parenteral, enteral and oral nutrition strategies were provided as well as information on breastmilk and preterm commercial formulas. Severe preterm infants typically begin on parenteral nutrition and advance to enteral or oral nutrition. The type of nutrition provided is dependent on the infant's health and developmental stage.

Conference Highlights Include:

- All women who give birth at Texas Children's Hospital to a preterm infant weighing 1,250 grams (2 pounds 12 ounces) or less are asked to provide their breastmilk for their infant. If the woman declines, the infant is offered donor milk. Breastmilk is the preferred form of nourishment for many reasons, but one important reason is that it is completely sterile. When commercial formulas are provided to these fragile infants, many develop life threatening illnesses such as necrotizing enterocolitis (NEC). Prolacta, human milk fortifier made from human donor milk, is added to breastmilk to enhance the nutrient content. Physicians have experienced less NEC with human milk and Prolacta as opposed to human milk with commercial milk based human milk fortifier.

- Some nutrients the preterm infant may be lacking include iron, zinc and copper. Anemia is very common in premature infants. It is not a nutrition problem; it is a problem due to being born prematurely. Zinc deficiency is hard to test due to the time it takes to get results. When a deficiency is suspected, zinc supplementation is provided and if clinical signs improve, then it is determined it was a zinc deficiency. Copper deficiency is detectable but difficult to treat because it can cause cholestasis which may lead to hepatitis and ultimately death. Preterm infants appear to have sufficient calcium and phosphorus for bone formation.

- The more premature an infant, the more growth restriction the infant experiences. It has been shown that increased levels of protein and energy (calories) produce better developmental outcomes for the extremely low birth weight infant, weighing less than 1,000 grams. These infants initially received their nourishment through total parenteral nutrition (TPN) and advance to enteral feeding because the protein and energy levels of standard preterm formulas are insufficient for these infants. Studies continue to strongly suggest that the nourishment and growth that takes place in the neonatal intensive care unit (NICU) are related to the developmental outcomes of the preterm infants.

- In summary, preterm infants need proper nourishment to grow and survive. It is in the NICU that the aggressive nourishment is provided. By discharge, these infants have been transitioned to standard preterm formulas or breastmilk with human milk fortifiers.

The conference brought to light that when the preterm infant comes into the WIC clinic for assistance, they have fought for their lives and have received the best medical and nutrition care. We need to be sensitive to the families' needs. It is imperative that WIC staff understand how fragile the preterm infants are and how their development differs from full-term infants. The conference is highly recommended for WIC staff.
Conference Wrap-up:

Texas Dietetic Association Food and Nutrition Conference & Exhibition and National WIC Association Education and Networking Conference and Exhibits

by Frances Diep, R.D., L.D.,
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&

Shellie Shores, R.D.,
Client Engagement Specialist

“Translating Trends into Reality for the Dietetic Professional”
—Texas Dietetic Association (TDA) Food and Nutrition Conference and Exhibition, April 7-9, 2011

Each year, dietetic professionals and nutrition students from across the state of Texas and beyond gather for the annual Texas Dietetic Association Food and Nutrition Conference and Exhibition (TDA FNCE). This year’s conference took place at the Westin Oaks Houston, connected to the Galleria shopping center. Between hearing from a variety of unique speakers, sampling food products at the exhibition hall, and networking with other professionals, conference attendees had the opportunity to fit shopping into their schedules.

This year’s TDA FNCE theme was “Translating Trends into Reality for the Dietetic Professional.” The conference was organized into two and a half days of general and concurrent speaker sessions. This allowed conference attendees to select from a variety of topics to meet their interests and needs. Some of the session topics included emerging dietary recommendations, biotechnology in farming and agriculture, social media, fighting childhood obesity, and school nutrition programs.

In addition to speaker sessions that highlighted current and emerging trends in nutrition and dietetics, the conference theme of “Translating Trends into Reality for the Dietetic Professional” came to life with conference moderators frequently encouraging attendees to “Tweet” new and interesting information, and “Like” exhibitor and speaker pages on Facebook.

To highlight a few of the speaker sessions, the first full conference day’s general session was presented by James Painter, Ph.D., R.D., professor and chair of the School of Family and Consumer Science at Eastern Illinois University. Painter discussed some of the latest research regarding the top ten foods to reduce heart disease. These top ten food products included 1) mono and polyunsaturated fats, 2) high omega-3 fish, 3) nuts/almonds, 4) phytosterols, 5) soy protein, 6) oats, 7) wine or grape juice, 8) black or green tea, 9) garlic, and 10) chocolate!

Another session highlighting trends was presented by Linda McDonald, owner of Supermarket Savvy. McDonald discussed the top ten food trends and predictions of 2011, and shared emerging opportunities for registered dietitians and nutrition professionals within the supermarket. Her top ten food predictions of 2011 included 1) foods targeted towards men, or “dude foods”, 2) decreasing sodium in foods, 3) the domination of smart phone food apps, 4) revamping of food label, 5) nutrition information shelf tags in grocery stores, 6) reduced sugar in foods, 7) the quest for super foods, 8) vitamin D fortification of foods, 9) “natural” and minimal ingredient foods and 10) gluten free foods.

A session presented by Chuck Jones, of Synergy Broadcast Systems, explored the use of social media tools for professional and community outreach and for enhancing patient education and interaction. Social media allows us to “connect, share, collaborate, interact, socialize, and meet from our computers and mobile devices.” This session emphasized recognizing the growing demand for opportunities for hospitals, clinics, and healthcare providers to utilize social media. Interestingly, three of the top ten health searches on Google were associated with diet and nutrition.
The closing session of the conference discussed Fuel Up to Play 60, an in-school nutrition program founded by the National Dairy Council and the NFL. The program provides tools and resources for schools and communities to engage and empower children to be physically active and make healthy choices. This session was presented by spokeswoman Teresa Wagner along with former Dallas Cowboy Daryl Johnson.

“Fresh Northwest”

The National WIC Association (NWA) is made up of state and local agency directors, nutrition and breastfeeding coordinators, peer counselors, fiscal, vendor and information systems managers. NWA is the education arm and advocacy voice of the nation’s nine million mothers and young children participating in WIC and the public health professionals from the 12,200 service provider agencies. Over 500 WIC staff from across the country came together in Portland, Oregon for four days to network and attend sessions on a variety of WIC-related topics.

Technology themes were prevalent at the conference. New technologies continue to bring opportunities to all areas of the WIC program. It is exciting to see how other states are using technology and to think about how we might use them in Texas.

Technology Innovations in Providing Nutrition Education to Participants and Staff – presented by representatives from the Georgia, Oregon and Missouri WIC programs

Representatives from the Georgia, Oregon and Missouri WIC programs presented detailed information about using video conferencing to provide certification, nutrition education, and high-risk counseling to participants in rural areas. Oregon and Missouri use Skype to spread the reach of their RDs to locations that are part-time and rural. The technology saves travel costs for WIC staff and participants. In some cases, traveling by car to provide these services would involve a total travel time of four hours. All three states experienced some initial frustration with set-up of their systems, but survey data indicates that participants and staff are positive about services delivered using this technology.

Painting a Compelling Picture with Effective eLearning Design – presented by Suzanne Ebbers

In general, WIC is pretty good at understanding how adults learn best and incorporating those principles into our printed materials and group classes. However, applying adult learning principles to an electronic learning setting can be daunting. Suzanne Ebbers conducted a session on just this – using instructional design principles to support the learning needs of our WIC participants. The presentation explored five adult learning needs: 1) Imagination, 2) Safety/Security, 3) Curiosity, 4) Control and 5) Feedback and how to meet these needs when developing computer-based education. So, how do we meet these needs?

1) Imagination – Use storytelling, pictures and visuals to make a movie in our participants’ minds.

2) Safety/Security – Create a consistent design interface or template throughout your lesson or presentation. Give learners the opportunity to practice what they are learning and provide feedback.

3) Curiosity – Incorporate surprises or variability by using visuals, humor and music into presentations.

4) Control – Allow learners to make several attempts to get something right; this interaction and choice meets their need for control.

5) Feedback – Provide immediate feedback to incremental tasks; achievement of incremental goals will build the learner’s confidence.

Other sessions explored using social media in the WIC program—technology to support states that are converting to an EBT system and using EBT and iPhone apps to maximize the redemption of the WIC fruit and vegetable cash benefits. In the exhibit area, vendors displayed a wide array of products for computer-based education and training, text and e-mail services for appointment reminders and education and multiple technologies for EBT and Management Information Systems. As our phones turn into mini-computers and the world “shrinks” as a result of the internet and computer technology, it is exciting to see where this will take the WIC program.
Reflections: The 2011 Texas WIC Dietetic Internship Graduates

In their own words...

compiled by Mary Van Eck, M.S., R.D., L.D.
Texas WIC Dietetic Internship Director

“My name is Brittney Nicole Adams and I work for Local Agency 7 in Dallas. I graduated with my Baccalaureate of Science in Nutrition/Dietetics in May 2008 from The University of Texas in Austin, Hook ‘Em! During this internship I have grown both personally and professionally. I feel like the Texas WIC Dietetic Internship has afforded me the opportunity to grow and develop into a better all-around health-care professional. I have learned all of the ins and outs of being a registered dietitian and have learned that RDs play an integral role in health care and well-being, both acute and preventative. My career goals include performing high-risk nutrition counseling for WIC and also practicing as a clinical dietitian in an acute care setting. I would also love to move to the state level at WIC and help to build high risk and nutrition education programs. The WIC Dietetic Internship has been the best opportunity of my life and I can’t wait to begin my professional life as a registered dietitian!”

Brittney Adams

“My name is Enrique Lira, and I currently work for Local Agency 13, City of Laredo Health Department WIC program. In December of 2005, I earned a bachelor’s degree in nutrition from Texas State University. The dietetic internship has challenged my analytical skills and promoted critical thinking in all areas of dietetics; because of this I am a better nutritionist. I pursued the internship because there is no better way of becoming an expert in the field of dietetics. The experience provided through practice in the food service, clinical, and community settings has prepared me for my community’s most pronounced issues concerning health. Upon completion of the internship, I plan to continue working with WIC clients and support my community through positive reinforcement and the latest evidence-based practices.”

Enrique Lira

“My name is Cassie Shockey-Holguin. I am a graduate of Texas Woman’s University with a degree in dietetics and institutional administration. Currently I work for Local Agency #7 in Dallas. I am employed as a public health nutritionist and work as a clinic supervisor. I was excited to participate in this year’s internship and saw it as an opportunity to improve my knowledge and skills in the field of nutrition. The ever-evolving field of nutrition can be confusing to so many people. They look to professionals, such as RDs, to help dispel myths and provide accurate information. Completing the internship and becoming a registered dietitian allows me to be one of those professionals that our WIC clients can turn to. I hope to continue to use what I have learned to help the people of my community as a registered dietitian for WIC.”

Cassie Shockey-Holguin
My name is Meagan Williams. I was born and raised near The Grove, Texas. I work at Local Agency 31 in Bell County. I graduated from Georgia Southern University with a Bachelor of Science in Nutrition and Food Science in May 2009. I knew that I wanted to work for WIC and in the community nutrition field early on in college. Once I graduated and began volunteering for WIC I knew it was where I was meant to be. I applied to the internship program to develop my skills in counseling and nutrition. I hope to become an asset to my local agency and help with our growing case load. I plan on pursuing a graduate degree in community health in the future. The Texas WIC internship is an amazing experience that has taught me so much about dietetics and I’ve learned so much about myself as well. I want to thank my family and friends for being so supportive during my internship.”

“My name is Meredith Spencer and I graduated from Texas A&M University, class of 2006, and currently work with LA 54 in Tarrant County. This internship has been a wonderful opportunity to expand my horizons so that I am better equipped to assist the people I come in contact with. One of my career goals is to continually broaden the scope of my practice and education to more effectively communicate a positive nutrition message to the public. The prevention of disease through nutrition intervention has always been an area of interest and I look forward to working with organizations with this mission. This internship has been a unique and challenging experience and I will never forget the people I have met nor the lessons I have learned.”

“I am Anissa Miller and I have worked at 29-01 in Richmond for 3 years. I graduated with a Bachelor of Science in Human Food and Nutrition from the University of Houston. The WIC internship has been a blessing to me in that it has provided me a myriad of first hand learning experiences. I have always loved to help people, and now I feel like I am prepared to provide a true, life-changing service to people. This internship has opened my eyes to the different areas of dietetics, and has made me realize I truly love helping the WIC population. I am excited to get back to my WIC clinic and put my hard earned knowledge to use. At the same time, I am eager to try my hand in other areas as well.”

“My name is Bethany Romero. I am from Centro de Salud Familiar La Fe’s WIC program, LA 28, and I graduated from Texas A&M University–Kingsville. Although I wasn’t sure what to expect, just that it was going to be a lot of hard work and dedication. I have truly enjoyed the internship and all that it has taught me. I also have come to realize that there are so many different fields within dietetics that are out there as well as the ability to specialize within these areas. There are so many opportunities that are available to me now and I can’t wait to see where dietetics takes me!”

(Interns continued on page 16)
“I have been with LA 01 in Austin for four years, after graduating from Texas State University in San Marcos. My name is Rachel Dunn and I started at WIC with the intention of applying for the Dietetic Internship, but sort of forgot about it and got comfortable in my job. My mentor, Yvonne Martinez, a graduate of the WIC internship, encouraged me to apply, but I was afraid to get out of my comfort zone. After a lot of thought and lots of pep talks from friends and family, I knew I was ready to go for it. The internship has opened my eyes to areas of dietetics that I did not think I was interested in, like clinical nutrition, but I also really miss being in the clinic. I’m excited to get back to my clinic and to start doing high risk counseling.”

Rachel Dunn

“Gladys Rodriguez and for the past two years I’ve been working for Local Agency 17-18 (Houston, Texas: UT Aldine WIC). I graduated from Texas A&M University in December 2008 with a Bachelor of Science in Nutritional Sciences. Since the age of 5, after moving from Guanajuato, Mexico, I’ve been living in the Aldine community in Houston. It is very rewarding to help the community I currently live and grew up in. I enjoy working for WIC and helping clients with their nutrition needs! While working for WIC, it was great to find out that WIC had a dietetic internship program. With this internship I want to be able to strengthen my skills and increase my knowledge in all areas of dietetics. I have an interest with special needs children and in promoting the importance of breastfeeding. After completing the internship, I plan to continue working for LA 17, obtaining the RD credentials and pursuing a master’s degree. In the future I would like to work as an RD in other nutrition/clinical settings to enhance my abilities as an RD.”

Gladys Rodriguez

“My name is Corinna Orms and I currently work for LA 77-UTMB Regional WIC Program. I completed my undergraduate at Texas A&M University in College Station in May 2008 with a Bachelor of Science in Nutritional Science. I am currently working toward completion of my master’s in nutrition and dietetics from Central Michigan University. Receiving my master’s degree while completing a dietetic internship and attaining my RD licensure have been professional and educational goals since the start of my undergrad. I later hope to become certified as a pediatric specialist. Credentials are extremely important to me because they signify a level of expertise that professionals and clients can feel comfortable trusting. I am extremely passionate about the field of nutrition, particularly relating to infants and children. Early intervention and education through children is crucial to the overall health of future generations.”

Corinna Orms

“My name is Melissa Gause. I work at LA 26, City of Houston, and I graduated from Texas State University in August of 2003 with a bachelor’s degree in family and consumer sciences in nutrition and food science. I later went on to earn my master’s degree in nutrition from Texas Woman’s University in May of 2008. The reason why I want to complete the internship is to become a registered dietitian in order to help my family, community, and others to maintain a healthy lifestyle. My future career goals include promoting wellness, perhaps in an outpatient setting, being a breastfeeding advocate and ultimately a lactation consultant, with a long-term goal of eventually becoming a nutrition professor for a major college or university.”

Melissa Gause
Two WIC Media Staff Retired

by Joseph M. de Leon
Contributing Editor

Shari Perrotta

“WIC helps improve life for so many families across Texas, and to have been a part of that is awesome,” WIC’s Publishing, Promotion and Media Manager Shari Perrotta said.

Perrotta began her media career in the late 1970s when she launched a news career that ultimately lead her to an anchor position at KVUE-TV using the on-air name “Kathleen Campbell.” As a reporter she covered such personalities as astronaut Alan B. Shepherd, musician Ted Nugent and President Ronald Reagan.

In 1987, she brought her communication skills to the state of Texas. Now with more than 23 years of state service, Perrotta retired May 31. Her state service included working as director of the public information office for the former Texas Department of Mental Health and Mental Retardation and, most recently, as manager of Publishing, Promotion, and Media Services for Texas WIC.

When Perrotta joined the Texas WIC team in 2004, she managed a group of designers, writers, videographers and a photographer responsible for communicating information to Texas WIC families and staff. The media services team produces posters, manuals, logos, videos, articles, pamphlets, door hangers, stickers, Texas WIC News, and training materials.

In retirement Perrotta plans to pursue her passion for animals. Currently she cares for six miniature horses and operates a dog sanctuary called Blue Sky Animal Rescue on 10 acres in Smithville. She also plans to take up cycling and continue sky diving—she’s jumped out of airplanes more than 200 times.

Brent McMillon

Graphic designer Brent McMillon, who lives in San Antonio, retired July 31, 2011, after more than 14 years of service on the Publishing, Promotions and Media Services team.

McMillon worked on such projects as designing the current Texas WIC logo, WIC Wellness publications, and most of the food package materials.

While he is not sure how he’ll spend his time immediately after retirement, he hopes to travel both locally and abroad to such places as Hawaii, the Caribbean and the Philippines. In 2005, he spent three weeks in the Philippines with his wife, Laura, who grew up on the island nation. They travelled to four islands to see the sights, lounge on the beach, and go snorkeling. The pair also spent time with her family and enjoyed a part of the Southeast Asian archipelago few tourists see.

“We had a great time out there and I want to go back,” McMillon said. “I love the ocean, beach, and the weather.”

McMillon previously worked 19 years as a graphic artist for the Texas Hospital Association, and from 1968 to 1970 he served in the U.S. Army as an artilleryman, spending a tour of duty in Vietnam.

“What I’m going to miss most is the challenge of creating new publications and materials,” he said. “That, and the people I work with.”

McMillon said he won’t miss getting up at 5:30 a.m.

(More retirees on page 18)
More Longtime WIC Employees Retire in 2011

by Betty Castle
Contributing Editor

Delores Preece

“I can truly say, I love this job,” WIC veteran Delores Preece said as she was preparing to retire June 30. For almost 18 years Preece worked with WIC, her last position as administrative assistant in the Nutrition Education and Breastfeeding Branch of the Nutrition Education/Clinic Services Unit. Prior to WIC, she worked two years for The University of Texas at Austin.

Linda Brumble, unit manager of WIC’s Nutrition Education Clinic Services Unit, said, “Delores is very organized,” and that’s what it takes to handle timesheets, travel, and correspondence. Preece also developed the memo system that keeps our offices connected to the local agencies and web followers. Plus, she was involved in WIC’s Dietetic Internship program, coordinating events and keeping contact with the new interns.

When asked about her plans, Preece said, “I plan to take some time off to do some traveling around the state to see areas I’ve always wanted to see. Both my husband and I love to search for arrowheads, I love to work in my flower garden and this year I have taken a real interest in growing some of our own vegetables.” She also admitted to having some help from her 8-month-old Dachshund, Trouble, of who she said, “has his own gardening ideas that don’t always match mine.”

She plans to spend more time with her three grandchildren during the summers. “I can remember growing up and how special my time with my grandmother was,” Preece said. “I hope I can grow some good memories with each of them.”

Just shy of 20 years state service, Preece left a job she loved to spend time with the man she loves, Henry (known to friends as Buster), her husband of 43 years.

Jewell Stremler

“W hat a great joy it was to have had a job where I felt the work I did mattered and benefited mothers and babies in such an important way,” said Jewell Stremler following her retirement on January 31. Originally hired as an information specialist for Nutrition Education, Breastfeeding, and Outreach more than 29 years ago, Stremler became WIC’s first breastfeeding coordinator in 1989.

In May 1991, she developed the program that held her passion for the balance of her career, the Texas WIC Breastfeeding Peer Counselor Program. That program is celebrating its 20th Anniversary this year.
Rich Tharp (left) and Tom Bleich (right) help celebrate Felipe Lopez’s (center) retirement.

Felipe Lopez

WIC warehouse manager of 20 years, Felipe Lopez, retired on April 30. First hired 22 years ago as warehouse manager at the main DSHS warehouse by Moses Hutchinson, Lopez was promoted to team lead to run the WIC Warehouse two years later.

“Mr. Lopez instituted the only system we ever had in the warehouse,” said Linda Brumble, unit manager of WIC’s Nutrition Education Clinic Services Unit. “Before Lopez, there was no system. Lopez organized, distributed, and kept track of all the WIC forms and other printed materials. If you asked him about stock for a certain publication, he could tell you off the top of his head. He has an amazing memory.”

“Yes, I do have a good memory,” Lopez confirmed at his retirement party held April 28. “It helps to know where everything is.” When Lopez started WIC still had punch cards and then vouchers, then EBT. The warehouse was mostly forms, then came publications, followed by videos. “As more and more stuff was produced, I ordered an inventory system, learned it and implemented it,” Lopez said.

His supervisor, Brenda Bardwell, program services operations branch manager, added that Mr. Lopez was a dedicated employee who was always going the extra mile to make things run smoothly and save WIC money.

“In the past 20 years we have trained over 3,500 mothers to be breastfeeding peer counselors in Texas. In addition to WIC agencies, the peer counselors are also working in 84 Texas hospitals helping moms to get started breastfeeding. Many of them have gone on to become IBCLC certified lactation consultants,” Stremler said.

“The Peer Counselor Program wasn’t easy to get off the ground.” commented Linda Brumble, Stremler’s supervisor. Brumble explained that the counselors often make their own schedules and have to be available when the new mothers need them. But the program’s success is reflected in the increase in the local agency breastfeeding rates. And since the counselors have to come from the WIC program, for many of these women, this is their first professional job. It benefits our WIC moms in many ways. “This was Jewell’s baby. Her passion made this program run.”

Stremler is continuing her work, post retirement, as Educational Development Coordinator at Hale Publishing. Check out her latest works at http://www.ibreastfeeding.com.

Lopez and his wife, Nina, are looking forward to spending time with their extended family in Brownsville. “I’m planning to fix up the house and try to sell and then move back to Brownsville. We moved to Austin in 1975.” Lopez said.

Their only child, Eddie, who was raised in Austin and graduated from The University of Texas, currently lives in Austin.

Lopez said of his retirement plans: “We need to spend time with our parents now.”
Texas WIC News is now available on the Texas WIC Web site!
http://www.dshs.state.tx.us/wichd/gi/wicnews.shtm

next issue:
Laying the Foundations for 2012