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All lesson plans are available on SharePoint

SECTION I: EVALUATION FFY 2016

OVERVIEW

Local agencies continued to implement improvements to nutrition education services. In FFY 2016, local agencies offered participants a choice of nutrition education topics and delivery methods for second contacts. Local agencies continued training staff to use facilitated discussion as the nutrition and breastfeeding class format. Local agencies reported that participants liked having a choice of class topics for nutrition education; however, they expressed concern for a decline in attendance at group education classes.

All local agencies have implemented VENA by using the revised nutrition assessment tools, providing participants a choice in nutrition education and conducting participant-centered group nutrition education classes. Continued improvements in nutrition services were attributed to New Jersey WIC Services and local agency efforts toward “Revitalizing Quality Nutrition Services in WIC.” Efforts to improve nutrition education and service delivery in FFY 2016, included, but were not limited to:

- Continued year-round promotion of fruits and vegetables and physical activity, and increased visibility of these messages in the clinic environment;
- More CPAs utilized a facilitated discussion/motivational interviewing format for nutrition education classes as well as individual contacts;
- Ability of local agencies to print materials for participants directly from SharePoint or the internet;
- Increased use of visual aids, food demonstrations, incentives, and technology to support education;
- Attendance at community health fairs;
- Facility renovations and moves to larger spaces to improve the clinic environment for nutrition education; and,
- Collaboration with local health departments, Federally Qualified Health Centers, vendors, farm markets, Head Start programs, hospitals and community groups.

Local agencies are commended for continuing to improve the quality of nutrition services to participants. Many agencies continued to take advantage of additional grant and funding opportunities to expand their clinic space and staffing. Agencies also used the WICWorks Learning online education system for staff development as well as orientation for new CPAs. In addition, the Grow and Glow training modules also found on WICWorks were used for new staff that missed the initial State-provided trainings.

The challenge of meeting the language needs of the Spanish-speaking population as well as other non-English speaking populations continue. More than 50% of New Jersey WIC participants are of Latino/Hispanic decent, and data suggests that Spanish is the primary language spoken in approximately 30% of WIC households. Local agencies continue to have difficulties recruiting bi-lingual nutritionists and support staff in numbers sufficient to meet the needs of this population. The State agency has translated the new Substance Abuse handout into

the following languages: Arabic, Bengali, Spanish, French Creole, Portuguese and Vietnamese. All local agencies are now using the Language Line to help meet the needs of all non-English speaking participants.

Ongoing competency-based training for WIC professional staff and new employee training continue to be one of the critical needs of the local agencies. All local agencies now have internet. The majority of agencies provided internet access to their staff in FFY 2016. This access will increase the ability of local agencies to take advantage of FNS-sponsored free, online trainings developed specifically for WIC staff. More agencies now suggest the use of trained paraprofessionals to deliver low-risk nutrition education contacts in Spanish, and self-study, DVD and web-based training and education are ways to more efficiently deliver services with available staff resources.

NUTRITION EDUCATION EVALUATION

In FY 2016, many of the local agencies conducted their own participant surveys, which included delivery of nutrition education and customer service.

LOCAL AGENCY TEACHING METHODS

Local agencies provided nutrition education utilizing a variety of teaching methods, including but not limited to, group facilitated discussion, case studies, food demonstrations, tastings, interactive electronic education on touch screen kiosks and individualized instruction. Content of counseling was based on the lesson plans in Section IV. The lesson plans include objectives, materials and methods, content outline, evaluation and nutrition education provider suggestions for active participation on the part of the participants. More agencies are utilizing lesson plans developed by other WIC State agencies including California and Texas.

TOPICS CHOSEN BY LOCAL AGENCIES AND THEIR PARTICIPANTS

Local agencies offered participants the opportunity to select their nutrition education topics from a list of choices. Most agencies incorporated physical activity into their nutrition education classes and their individual nutrition counseling. The top five most selected secondary nutrition education topics based on the quarterly Secondary Education Nutrition Contacts Report as of June 30, 2016, were: 1) Child Nutrition; 2) Breastfeeding; 3) Infant Nutrition; 4) Anemia and Iron; and 5) Healthy Weight.

BREASTFEEDING PROMOTION AND SUPPORT SERVICES

Breastfeeding promotion focused on identifying and addressing a pregnant woman's barriers to breastfeeding, recognizing her stage of change in her thoughts about breastfeeding, and then using facilitated discussion to help her move to the next stage with a goal of making a confident decision to breastfeed. Prenatal topics included the importance of breastfeeding and how to manage breastfeeding in the first weeks. Information comparing the nutrients in formula to those in human milk was available in both flyer and poster formats.

Breastfeeding support services were tailored to individual needs. Handouts targeted to specific questions and situations were available. Emotion-based handouts and posters included messages to breastfeed for at least one year, confidence builders for mothers, and specific handouts for teen mothers and grandmothers.

IMPLEMENTATION OF NJWICONLINE.ORG

GENERAL INFORMATION

- As of June 30 2016, there were 20,032 registered WIC households. These participants completed at least one online educational activity to count as a nutrition education contact.
- NJWICOnline.org website is available at all WIC Local Agency administrative sites via stand-alone kiosks, and participants now have mobile access.
- New modules added include Eating Healthy, Nutrition for Teens and Physical Activity for Teens.

Website Data

From July 1, 2015, through June 30, 2016, the following modules were completed by registered WIC households. Each module contains 4 different lessons. The most popular modules are “Being Active” (English) and “Fruits and Vegetables” (Spanish). The modules are as follows:

- Calcio-Spanish-542
- Calcium-3027
- Cholesterol- 1979
- Colesterol- 231
- **Frutas y Verduras-Spanish- 1146**
- Fruits & Vegetable- 5179
- Iron- 1248
- El Hierro- 73
- Oral Health- 2991
- La Salud Bucal-359
- Breastfeeding – 3472
- La Lactancia Materna- 483
- **Being Active- 5859**
- Estar Activo – 787
- Eating Healthy - 477
- Alimentación Saludable - 49

RESOURCE AND TRAINING NEEDS

The State collects training and resource needs from the local agencies throughout the year, and assesses future training and resource needs as part of the evaluation for Nutrition Services meetings. State staff conducted an online survey to obtain new staff orientation training needs to better plan for FY 2016. See below resource requests:

Resource Requests:

New Lesson Plan Topics

- Food Allergies

Nutrition Education Topics for Materials/Handouts

- Obesity Prevention and Overweight

Education Resources Needed

- DVDs in English and Spanish for each lesson
- Materials in alternative languages

Critical Needs to Provide Quality Nutrition Services

- Bi-lingual (Spanish) CPAs
- Alternative translation/interpreters for meeting language needs of participants
- Ongoing, competency based training for all CPAs
- Trained, bi-lingual paraprofessionals for nutrition education
- Additional lessons for
 - Online, computer based or Kiosk
 - Lessons in Spanish for when bi-lingual staff are not available
 - Picky Eaters, WIC Food Package
 - Infant Feeding

Training Needs:

Training Needs for Professional Staff

- Facilitative Discussion Training
- Motivational Interviewing
- Specialized Infant formulas
- Creative, interactive nutrition education
- Assessment/ Critical Thinking/Counseling skills
- Documentation
- Policies and Procedures
- Nutrition Risk Criteria
- Refresh VENA/Grow and Glow

Training Needs for Support Staff

- Communication/Critical Thinking
- Anthropometrics
- Policies and Procedures
- Customer Service
- Blood work
- Breastfeeding
- Refresh VENA/Grow and Glow

Preferred Training Method

- Self study or CD-ROM
- One day trainings at the local agencies
- Regional Nutrition services meetings
- Online

- An annual conference for all WIC Staff

Nutrition Service Meeting topics

- Postpartum Depression
- Diabetes/Gestational Diabetes
- Pediatric Nutrition – current issues
- Malnutrition/Obesity
- Cultural Foods, Nutrient Value of Cultural foods.
- How to handle difficult clients
- Spanish Language training
- Facilitated Discussion Training

NUTRITION EDUCATION BEST PRACTICES FOR FFY 2016

Special programs, initiatives, and activities aimed at “Revitalizing Quality Nutrition Services in WIC” at both the State and local agency level are highlighted in this section.

STATE AGENCY INITIATIVES

Value Enhanced Nutrition Assessment (VENA)

In FFY 2016, local agency staff continued to improve their VENA skills by completing the WIC online training modules and conducting more facilitated group education classes. State nutrition services staff continued to monitor the local agency staff during onsite reviews and offered recommendations to improve their VENA skills. Based on onsite review recommendations as well as local agency requests, State staff continued to provide trainings throughout the State on SOAP notes, General notes and counseling.

Peer Counselor Training

The State Peer Counselor Coordinator began in 2016 to conduct state-wide peer counselor training. This change in approach has freed the local agencies from the time-intensive commitment of training the formal *Loving Support® Through Peer Counseling* curriculum and allows for more interactions between peer counselors. The training is six full days given once per week. There has been one training completed so far with two other sessions planned for August and November. Responses from the local agencies have been positive.

State Agency/Breastfeeding Collaboration

To promote and support breastfeeding, WIC collaborates on several initiatives within the Department of Health.

- State WIC collaborate with other **ShapingNJ** Partners on the goal to increase exclusive breastfeeding rates in the State. With the CDC DP 13-1305 grant (State Public Health Actions to Prevent and Control Diabetes, Heart Disease, Obesity and Associated Risk Factors and Promote School Health), the Department of Health and New Jersey Hospital Association are working with seventeen hospitals to help them implement the Ten Steps to Successful Breastfeeding of the World Health Organization. WIC participates in the quarterly Advisory Group meetings which guides the work of the Healthy Beginnings Strategy Workgroup.
- Provide planning for the Annual Mother-Baby Summit.
- WIC collaborates with **ShapingNJ** regarding the Early Childhood Environment setting. Information is provided to child care centers on how to support breastfeeding mothers and encourage pregnant women to breastfeed.
- WIC provides breastfeeding information to Maternal, Child, and Community Health Services for its Title V Block grant. MCCH collects and provides PRAMS (Pregnancy Risk Assessment Monitoring System) data.
- WIC provides breastfeeding data for Healthy New Jersey (HNJ) 2020 and participates in the HNJ Workgroup.

SNAP-Ed Collaboration

The NJ State WIC Program is interested in creating opportunities for FNS funded programs to collaborate, minimize duplication of efforts and create synergy. A Memorandum of Understanding has been created to clarify roles and expectations. A core planning group has been established that includes representatives of the New Jersey State WIC, NJ SNAP-Ed and NJ SNAP programs.

LOCAL AGENCY BEST PRACTICES AND ADDITIONAL NUTRITION ACTIVITIES

Local WIC agency CPAs throughout New Jersey sought to incorporate positive health messages related to increased physical activity, increased fruit and vegetable consumption, and the maintenance of a healthy weight, into all nutrition counseling. In FFY 2016, local agencies were encouraged to: improve the clinic environment for the promotion of these positive health messages, offer participants a choice of nutrition education classes to attend, offered opportunities to complete education on kiosks or via the internet and use facilitated discussion as the delivery method for second nutrition education contact. This section briefly describes local agency initiatives and best practices related to nutrition education and health promotion.

Burlington County WIC Program

- The LA is promoting Physical Activity all year round. The sponsors are supporting WIC by providing County-wide information on Physical Activity events through their website, Facebook and link. CPAs encourage the participants to visit these sites for more information.
- LA distributed Gym Bags with the theme " Good Health Starts with Physical Activity ".

East Orange WIC Program

- The main site offers Summer Meals that includes breakfast and lunch.
- The LA provides each participant a handout for easy 30 minute workouts called "Exercise from Home".

Gateway Community Action Partnership (Tri-County) WIC Program

- Since January 2016, the LA combined prenatal and postpartum groups and conduct classes separated by language rather than by status. Also, some of the sites added more group classes to serve high risk participants.
- The LA continues to work with newfound partnerships formed during our CDC grant to enhance community coalitions, perform community needs assessments, and develop and implement community action plans to achieve health goals not only in Camden County, but now extending to Cape May, Cumberland, Atlantic, and Salem counties.
- The LA continue having Cooper residents rotate through Mt. Ephraim WIC. Our staff had an opportunity to attend breastfeeding and nutrition workshop trainings at Cooper residents; also nutrition/WIC workshops were done at PRUP, Cooper Hospital, CamCare Pediatrics, and Camden County Health Dept.

Gloucester County WIC Program

- For National Nutrition Month, a Dietetic Intern from University of Delaware presented a lesson on the theme “Savor the Flavor of Eating Right”. The lesson included tips for healthy eating and seasoning foods with herbs in place of salt and sodium containing flavorings. Participants also received the book “Two Bite Club” ordered via WIC Works.
- The LA have had several Rowan University students interview our nutrition staff on dietetic/nutrition careers, one student volunteer from Rowan University and the Chief Nutritionist has been a guest speaker on careers in dietetics at Rowan University’s National Wellness Institute Student Chapter meetings. Gloucester County Department of Health’s Nursing Department provided our clinics with videos, posters, and handouts for National Immunization Week. We also have displayed CDC printable posters/notices regarding Zika virus. The Healthy Mom’s Healthy Babies Health Fair was held on June 7th. This year’s turnout was excellent with over 30 clients attending.

Jersey City WIC Program

- The goal for FY 2016 was to reduce the percentage of obese children in risk factor #113 from 6.1% to 5.7% based on data collected from March 2015 to March 2016. We reduced the percentage of obese children to 4.2%. A survey was given to authorized representatives at recertification to determine beverage intake (i.e., milk, energy drinks, and other sugar sweetened beverages), nutrient dense food intake, physical activity, and electronic usage. The authorized representative was able to observe a positive impact on the health of the child because of the positive direct correlation between decrease in weight change and an increase in physical activity and altering eating habits. Anthropometric measurements showed a decrease in weight, which led the child to living a healthier life.
- To raise awareness for proper dental hygiene, for ages 6 months and older, the CPAs created bulletin boards for National Dental Month (February). The CPAs educated the parents on food ingredients that cause tooth decay and created handouts for local dentists. The authorized representative received tooth brushes for infant 1-3 years old and sippy cups for infant 6 to 12 months old to aid in weaning off the bottle. Most of the authorized representatives stated that these tools helped them teach their children proper dental hygiene.

VNA of Central Jersey, Inc. WIC Program

- LA collaborated with SNAP ED to have a food demonstration on “Drink for Your Health”. The event was held in October in New Brunswick and Perth Amboy WIC clinics. Participants were informed on the amount of sugar in commonly consumed beverages. Participants tried out Hibiscus Tea as an alternative to sodas, juices and others sweetened drinks. Participants feedback indicated they liked the sessions, and would like more session with tasting of healthy beverage alternatives.
- Food Day (October): Our clinics highlighted seasonal produce in New Jersey (apples, cranberries, beets cabbage, and cauliflower) through the lesson: “Help Your Child Have a Healthy Weight”. “Healthy Holiday Recipes” lesson was conducted in the month of December.

WIC employees and WIC participants handed over recipes such as: Chicken Biryani, Tamales, Roasted Pork Shoulder, Rice and Pigeon Peas, Sea Bass Sudado with Olluco Pearls, Pasta with Chicken and fruits, Ripe Plantain Casserole, Light and Fluffy Spinach Quiche, Apple Salad, Caprese Pasta and others. The 3 best recipes were chosen and were displayed at our administrative sites.

Newark WIC Program

- Clients learned about the benefits of different produce as well as a variety of ways of preparing simple and easy-to-make recipes, using fruits & vegetables resulting in increased consumption of the same. The provision by the local Farmer of bagged produce brought about an increased rate of Farmer's Market check redemption for the LA. We had a 92% redemption rate for 2015.
- Food Demonstrations held on Food Day focused on preparation of Asian, Spanish, Haitian and African dishes that used WIC foods.

North Hudson Community Action Corporation (NHCAC) WIC Program

- In October, the LA held the “International Food Day” celebration by serving traditional foods from differing cultures and decorating the classroom with diverse flags, pottery, and costumes.
- In February we held the “Sippy Cup Event”. This facilitated discussion encourages participants to throw away their bottles and embrace sippy cups and toothbrushes.
- On June 26, the 9th Annual NHCAC WIC Health Fair took place. The safari themed event provided information on nutritious meals and snacks using WIC approved foods, breastfeeding education, health screenings, and fruit and vegetable themed activities for adults and children.
- The popular “Willow comes to WIC” project is an interactive puppet show about fruit and vegetables that is held three times per week.

NORWESCAP WIC Program

- In Phillipsburg, the agency collaborated with SNAP Ed. and the Health Department to bring a Farmer's Market into town. The farmers accepted farmers Market vouchers and we had educational activities and games.
- The agency is also working in Sussex County as part of the Community Health Initiative Plan to bring about healthy lifestyle changes in the community.

Plainfield WIC Program

- Collaborated with SNAP Ed for presentations on calcium and sugar.
- For World Food day held activities that included a nutrition wheel game that focused on healthy snacks and physical activity.
- During National Nutrition month a nutrition booth was set up at the Plainfield City Hall rotunda; city employees and visitors stopped by to experience weekly nutrition activities.

St. Joseph's Hospital & Medical Center WIC Program

- One of the barriers that was addressed this year, from the past, is that agency staff discuss food allergies during every education session. This opening line of conversation really engaged each participant and made them more aware of this topic.
- The agency participated in about 26 health fairs throughout the past year at agencies located throughout Passaic, Bergen, and Morris counties. This is a big part of our outreach efforts, and we look forward to all of these events in the coming year!
- The agency worked with the City of Morris County in providing breastfeeding and nutrition education classes for groups of pregnant women. This event was such a success, that they have our agency visiting them on a tri-monthly basis, and reaching out to these new pregnant moms.

Children's Home Society of New Jersey, Mercer WIC Program (CHS)

- Food Day was held in coordination with our health fair in the fall. National Nutrition Month event was held on May 30, 2016. National Dental Health month the dentist came and the group education classes were geared for proper oral health.
- The Health and Wellness Fair was held in the fall. There have been two dietetic interns who have been hosted this year.
- The agency participated in the Summer Feeding program.

Rutgers WIC Program

- During the year, Rutgers Dental School students provided weekly classes to participants, on the topic of Pediatric Dental and Oral Health. Infant and children in attendance received toothbrushes, toothpaste and training cups. Caregivers were given information on follow up dental appointments at the Pediatric Dental Clinic of the University.
- The problem of obesity and being overweight was addressed in an initiative, aimed at reducing the percentage of overweight postpartum women by 2%, as evidenced in the Nutritional Risk Factors Report of the NJ Department of Health. The project was a success in that of the first 25 postpartum women who were randomly selected for the study, 22 showed significant weight loss. The average weight loss among them was 11.14 pounds.

Ocean County Health Department WIC Program

- The LA will continue to use videos, tri-folds, and bulletin boards reiterate facilitated discussion topics. This year's focus is on reducing low hemoglobin test results.
- The LA will have Joyce Jackson from our Dental Clinic assist with our objectives, with respect to reducing 2-5-year-old children on the bottles/pacifiers.
- The LA collaborated with community groups throughout the county including, CUNA, Healthy Families, Family Planning of Ocean County, Ocean Inc. Head Start, and Lakewood Economic/Early HeadStart.

Passaic WIC Program

- The LA focused on oral health and held a Give Up the Bottle party. Another one is planned for August 2016. A Public Health intern assisted with planning and implementation.
- Several bulletin boards were created, including one for World Food Day.

Trinitas Hospital WIC Program

- The LA had a goal to decrease the percent of children enrolled for using inappropriate use of nursing bottles, cups or pacifiers risk by 0.5 percent, for a goal of less than 8.8 % in April 2016. During the first quarter of 2016, 254 children were certified with risk code oral health issues (45C). During the second quarter, 186 participants (10.4%) received group Oral Health education. Each nutritionist followed up on eight participants over a six-month period. Each CPA tracked eight participants and followed-up by the next certification period with a survey, phone contact or saw individually. The goal status was documented by the third quarter. The survey tool utilized was approved by NJWIC in the agency plan. The goal was accomplished as 8% of the children were enrolled for the oral risk.
- Classroom Transforms into a Farmers Market: Farmers Market services are supported as the agency coordinates with local farmers to provide produce on site. The agency continues to have one of the most successful redemption rates of farmers market produce vouchers. To better understand and relate services from the clients' perspective, local staff visited a farmer's market which helped staff to be better advocates of the program. Produce is delivered on-site. The classroom transforms into a Farmers Market offering an array of fresh fruits and vegetables. Nutritionists discussed the seasonal products, price, and preparation and health benefits of the foods.

LOCAL AGENCY BREASTFEEDING BEST PRACTICES AND ACTIVITIES

Local agencies were encouraged to self-assess their gaps in implementing all components of the *Loving Support*® Peer Counseling Program. Best practices and activities related to breastfeeding promotion and support are highlighted.

Burlington County WIC

During National Breastfeeding Month, posters, banners, and breastfeeding messages were displayed throughout the clinic. A demonstration on baby wearing was held during World Breastfeeding Week (WBW)

Children's Home Society WIC

A breastfeeding luncheon was held in February to coincide with Black History Month. Participants were honored for their breastfeeding success and given ribbons and gifts that were donated to CHS. World Breastfeeding Week was celebrated on August 2 during breastfeeding classes. Light snacks were available and drawings for donated gifts made the day memorable.

Gateway CAP WIC

“Breastfeeding Friendly” stickers were developed for businesses.
Breastfeeding peer counselors visit new WIC moms in three hospitals.
Gateway collaborates with two other organizations to offer parenting and childbirth classes.

Gloucester Co WIC

For National Breastfeeding Month, staff displayed bulletin boards with the theme and held a breastfeeding fair in each of the offices.

Jersey City WIC

Staff surveyed participants about breastfeeding. When asked about their interest in attending a breastfeeding support group, 64% were interested. When asked what concerns they have about breastfeeding, 80% responded low milk supply; 12% engorgement; and 4% sore nipples. Participants chose the afternoon as the best time to attend a breastfeeding group. Staff held a “Mommy and Me” group discussion for Mother’s Day, which included light refreshments, a small gift, and breastfeeding games.

Newark WIC

This agency holds monthly breastfeeding support groups and collaborates with two hospitals in community outreach events to promote breastfeeding and provide WIC information.

North Hudson WIC

The theme for the annual Breastfeeding Fair was “Breastfeeding and Work – Let’s Make It Work.” The fair was held in a public park and attracted many WIC participants and folks from the community.

NORWESCAP WIC

A “Breastfeeding Day” celebration was held during National Breastfeeding Month; pregnant and exclusively breastfeeding women were invited. The agency collaborated with the local medical center on a baby fair.

Ocean County WIC

The agency had breastfeeding displays in the Lakewood, Toms River, and Manahawkin offices during World Breastfeeding Week. The Ocean County Board approved a Resolution recognizing World Breastfeeding Week and the role that WIC provides in promoting, protecting, and supporting breastfeeding. Breastfeeding moms were recognized with a Breastfeeding Certificate of Achievement. The WIC staff was honored for their dedication to promoting breastfeeding.

Passaic WIC

The peer counselor created a bulletin board on the benefits of breastmilk.

Plainfield City WIC

The peer counselor attended two health fairs and one La Leche League after hours meeting. Weekly breastfeeding support groups were held along with check pickup and at least five moms attended each session. After hours breastfeeding classes were offered. For World Breastfeeding Week, there were demonstrations on breast pumps, infant safety and lead, and presentations on parenting and calcium. Participants who attended received a basket of donations from local school children and staff.

St. Joseph's WIC

For World Breastfeeding Week the agency held an Infant Massage class that was a great learning session for participants. Clients were very receptive to the class, had many questions for the instructor, and requested another class in the coming year.

Trinitas WIC

This agency set a goal to increase exclusive breastfeeding rates during the hospital stay. WIC, the Women's Health Center, Pediatric Health Center, Labor and Delivery and Post-partum units of Trinitas Regional Medical Center (RMC) collaborated to enhance the breastfeeding services each unit offered. A committee was formed to create a consistent and unified breastfeeding message throughout the units of service. Twenty WIC participants who planned to deliver at Trinitas RMC and planned on breastfeeding were followed. Of those, 3 women have not delivered, 1 delivered at another hospital, 2 did not return to WIC. Of the remaining 14, 3 exclusively breastfed, 10 women breastfed and gave formula, and 1 baby was admitted to the NICU and not breastfed. Mothers' fears of a low milk supply was the main reason they gave supplemental formula to their infants.

Rutgers WIC

In August, the agency held its annual breastfeeding party for pregnant and breastfeeding mothers. The event was well attended and was a tremendous success. Attendees received gifts and incentive items to take home. A delicious catered meal was served and various breastfeeding mothers and staff members who were currently breastfeeding addressed the crowd, giving words of encouragement and advice on the benefits of breastfeeding.

VNA-CJ WIC

Breastfeeding staff continued partnering with Community Health Centers.

SECTION II: PROGRAM OVERVIEW

Section 17 of the Child Nutrition Act of 1966, as amended, states that “substantial numbers of pregnant, postpartum and breastfeeding women, infants and young children from families with inadequate income are at special risk with respect to their physical and mental health by reason of inadequate nutrition or health care or both.”¹ Therefore, Congress authorized the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) to protect and improve the nutritional status of this population during the critical times of growth and development and to prevent the occurrence of health problems including substance abuse.

WIC benefits are delivered through sixteen local agencies in clinic and satellite sites throughout New Jersey. WIC benefits include:

1. Assessment of participants' nutritional status using anthropometric and hematological measures and dietary assessments.
2. Provision of individual/group counseling education and nutrition care plans for high-risk participants.
3. Provision of targeted nutrition education to participants to promote positive informed health and dietary choices and patterns.
4. The *Loving Support*® Through Peer Counseling breastfeeding program.
5. Provision of supplemental nutritious and wholesome foods to WIC participants.
6. Referrals to healthcare, the SNAP Program, TANF, Medicaid, substance abuse treatment and other social services.
7. Immunization screening.

Federal Regulations mandate that "Nutrition education shall be designed to achieve the following two broad goals:

- (1) Stress the relationship between proper nutrition and good health, with special emphasis on the nutritional needs of pregnant, postpartum, and breastfeeding women, infants and children less than five years of age and raise awareness about the dangers of using drugs and other harmful substances during pregnancy and while breastfeeding.
- (2) Assist the individual who is at nutritional risk in achieving a positive change in food habits, resulting in improved nutritional status and in the prevention of nutrition-related problems through optimal use of the supplemental foods and other nutritious

1. Child Nutrition Act of 1966 [As Amended Through P.L. 108-269, July 2, 2004], Section 17(a).

foods. This is to be taught in the context of the ethnic, cultural, and geographic preferences of the participants and with consideration for educational and environmental limitations experienced by the participants.”²

WIC provides nutrition risk assessment, food vouchers for obtaining supplemental nutritious foods, nutrition and breastfeeding education, and referral to pertinent health and social services. These components contribute to the early detection, reduction in incidence, and prevention of factors that lead to poor pregnancy and birth outcomes and improve the health and nutrition status of program participants. Enrollment into WIC is based on income as well as the presence of nutritional risk factors.

In 2015, New Jersey WIC Services through the local WIC agencies served 281,658 pregnant, postpartum, breastfeeding women, infants and children up to age five with low-income; and medical and/or nutrition risk factors. The ethnic distribution of the WIC Program participants was 50.38% Hispanic/Latino and 49.62% Non-Hispanic/Latino. Race distribution of New Jersey WIC participants: 2.55% American Indians and Alaska Native; 3.22% Asian; 25.31% African American; 1.09% Native Hawaiians or Pacific Islander, 65.08% Caucasian; and 2.76% Other. According to data from the 2011 Electronic Birth Certificate, 24.4% of all New Jersey live births were by WIC mothers.

More information on the WIC Population is available in the State Plan, which is posted on the NJ WIC website at www.state.nj.us/health/fhs/wic/index.

2. WIC Consolidated Regulations, 7 CFR Ch. 11, Subpart D, §246.11(b). January 1, 2004;345.

SECTION III: FFY 2017 STATEWIDE NUTRITION EDUCATION PLAN

OVERVIEW

During FFY 2017, nutrition education for WIC participants of all statuses will focus on encouraging healthy lifestyle behaviors related to healthy eating and physical activity to promote positive health outcomes.

- GOAL 1:** To promote optimal iron status in WIC participants and/or caretakers of WIC participants by encouraging the selection of foods high in iron and vitamin C.
- GOAL 2:** To promote the birth of normal weight, full term infants to pregnant women participants by encouraging them to eat properly and to gain an appropriate amount of weight during pregnancy.
- GOAL 3:** To promote the optimal growth and development of children by encouraging appropriate eating habits and the maintenance of a healthy weight.
- GOAL 4:** To promote the optimal growth and development of infants by encouraging appropriate feeding behaviors.
- GOAL 5:** To promote good oral health for infants and children participating in the WIC program.
- GOAL 6:** To encourage WIC participants to assess their personal risks for potential problems related to substance abuse (alcohol/drug intake) and cigarette smoking.
- GOAL 7:** To promote and support exclusive breastfeeding for six months, followed by continued breastfeeding as complementary foods are introduced, with the continuation of breastfeeding for one year or longer as mutually desired by mother and infant.
- GOAL 8:** To promote regular physical activity in conjunction with nutrition education to prevent and decrease the incidence of overweight and obesity and the maintenance of a healthy weight in WIC participants and caregivers of WIC participants.

MODEL HEALTHY LIFESTYLE BEHAVIORS

Local agency staff is encouraged to continue to model healthy lifestyle behaviors to participants. Strategies include prominently wearing a pedometer at work, posting activity reminders to take the stairs, organizing a walking lunch, and choosing healthy foods for meetings and celebrations. Worksite wellness activities are encouraged and can be coordinated with the local YMCA, fitness centers or through local health service providers.

PROMOTE PHYSICAL ACTIVITY

Local agencies are encouraged to promote the importance of physical activity by incorporating positive physical activity messages into all nutrition counseling. Recommended strategies include providing educational materials that stress the importance of physical activity, having physical activity displays or posters visible, and making a short statement at the end of every counseling session such as, "Good nutrition is not enough; remember to be physically active every day!" Local agencies are encouraged to utilize materials from *Get Fit New Jersey*, produced by the NJ Council on Physical Fitness and Sports, the President's Council on Physical Fitness and Sports, Team Nutrition, and the CDC as well as the lesson and resources provided in this document.

Local agency CPAs should review training materials and resources posted to NJ WIC SharePoint. Additional resources are available online and include the New 2010 Dietary Guidelines for Americans. The ChooseMyPlate.gov icon is the symbol of healthy lifestyles and incorporates the updated dietary guidelines. The guidelines continue to provide guidance for physical activity and are based on an individual's age and desired health benefit. CPAs are encouraged to help each participant understand these new recommendations and base their counseling on the participant's desired health goal.

STATEWIDE FRUIT AND VEGETABLE PROMOTION

Fruit and vegetable promotion plans specific to NJ WIC will continue to include communicating a positive, consumer friendly message to participants to consume more fruits and vegetables, as based on the Dietary Guidelines. Key resources will include:

- The USDA MyPlate message to "Make Half Your Plate Fruits and Vegetables." Materials are available at www.choosemyplate.gov
- The USDA Core Messages are resources that include supporting tips, advice and guidance designed to resonate with mothers and children served by WIC. Available at http://www.fns.usda.gov/fns/corenutritionmessages/fruits_veg_page.htm
- Additional resources including recipes, videos and tips for moms are available from the Produce for Better Health Foundation's brand known as *Fruit and Veggies More Matters*TM and available at <http://www.fruitsandveggiesmorematters.org/>

SNAP-Ed Collaboration

Anticipated Collaborative Activities and Outputs with potential of improving program outcomes includes:

- Reactivate NJ State Nutrition Action Committee (NJ SNAC).
- NJ SNAP Ed will explore how nutrition education lessons might be offered to local WIC agencies by SNAP-Ed staff. Current topics include colorful vegetables and sweetened beverages.
- NJ SNAP Ed will explore how lessons currently available on www.snaped4me.org may be offered through www.NJwiconline.org
- Local agencies have been informed and are encouraged to take advantage of the opportunity to provide third party education for WIC secondary educational contacts.

NUTRITION EDUCATION PLAN HIGHLIGHTS

Lesson content is consistent with the *Dietary Guidelines for Americans*. During FFY 2017, lessons will be reviewed and updated as needed based on the 2015-2020 Dietary Guidelines and the MyPlate resources. In response to VENA, the lesson section contains a brief summary of behaviorally and participant focused counseling strategies such as Motivational Interviewing, Facilitated Discussion, and Emotion-Based messages and includes references and a list of free training opportunities for professional staff.

NJWIC Online.org is available for participants as an alternative nutrition education option. The State Agency (SA) implemented Being Active lesson and also adapted the Breastfeeding module from Georgia WIC. In FFY 2016, the State agency implemented a Healthy Eating module. The State agency created brochures in English and Spanish to assist local agencies with the promotion of the nutrition education website NJWICOnline.org. The popularity of the kiosks and online option continues throughout the state at WIC agencies. The State is looking forward to seeing more WIC participants utilizing this nutrition education option in FFY 2017. NJWICOnline.org is available via kiosks at all local agency administrative sites with internet access, and also now available on mobile phones.

Local agencies are encouraged to visit the New Jersey WIC website to obtain updated materials and link to other nutrition education resources. The NJ WIC Website is www.state.nj.us/health/fhs/wic/index.

More resources will continue to be uploaded to NJWIC SharePoint in FY 2017.

IMPLEMENTATION

Local agency coordinators, chief nutritionists, CPAs, and lactation consultants must review the Statewide Nutrition Education Plan (SNEP). Agencies may adopt the plan in its entirety or use it as the base for development of a modified local agency plan.

If there are any modifications, local agencies shall submit the fillable evaluation form detailing the specific methods they will use to achieve the goals outlined by the State or submit a

modification based on specific population needs within their agency. This includes submitting an outline for any lesson topic not listed in the SNEP.

Local agency plans must include information pertaining to nutrition education topics, schedule, delivery method (group class or individual instruction), use of guest speakers, food demonstrations and/or any other special events planned to support the focus areas of increased physical activity, increased consumption of a variety of colorful fruits and vegetables and the maintenance of a healthy weight among WIC participants. Local agencies **must** include planned activities for National Nutrition Month, National Breastfeeding Month and when possible, schedule nutrition education topics to coincide with other National Health Observances. Agencies shall make available a variety of nutrition education class topics each month to allow choice by participants. *The SA encourages Local agencies to think “outside the box” when planning their nutrition education.*

BREASTFEEDING PROMOTION AND SUPPORT

Breastfeeding promotion and support services are part of Nutrition Education. Breastfeeding services are implemented and administered consistent with the USDA’s *Loving Support® Through Peer Counseling: A Journey Together for WIC Managers*. The local agency nutrition education plans show how breastfeeding promotion, protection, and support services are fully integrated into the clinic flow at the WIC local agencies. The plans describe how all pregnant and breastfeeding participants will have access to breastfeeding services, and include information on how staff schedules coincide with pregnant and breastfeeding participant schedules, and the delivery method for prenatal education (class or individual instruction) and how postpartum support services will be provided at the various sites. Grantees plan special activities for National Breastfeeding Month in August.

BREASTFEEDING INITIATION

To provide relevant, targeted messages to pregnant women about breastfeeding, WIC staff assesses a woman’s stage of change relative to breastfeeding. They need to know if she has breastfed other children and if so, if she met her goal; if she has considered breastfeeding; or if she is actively planning to breastfeed. Staff will address women’s individual barriers to breastfeeding using VENA techniques and the 3-Step counseling method. These techniques enable staff to build rapport with participants, identify their issues and needs, explore barriers to breastfeeding, and respond to them. Staff will give pregnant women accurate information and materials relevant to their situations so they can make informed infant feeding decisions.

BREASTFEEDING EXCLUSIVITY

Consistent with the American Academy of Pediatrics and World Health Organization, WIC encourages new mothers to exclusively breastfeed for six months, then to introduce complementary foods and continue breastfeeding for as long as mother and infant mutually desire. The WIC food package supports exclusive breastfeeding. Communication between breastfeeding staff and CPAs about mothers’ breastfeeding goals and plans to overcome problems is necessary to ensure appropriate support for breastfeeding dyads.

Two major barriers in New Jersey to mothers initiating exclusive breastfeeding are hospital practices that interfere with the establishment of exclusive breastfeeding and mothers returning to work or school after delivery.

In 2009, the CDC began issuing an annual Breastfeeding Report Card that provides state-by-state information to help tell the story of breastfeeding practices and support in states. It compiles outcome indicators and breastfeeding support indicators. Of all infants born in New Jersey in 2013 (the last year of available data), 82.0% initiated breastfeeding, 52.6% breastfed at 6 months, 30.2% breastfed at 12 months, 41.4% exclusively breastfed at 3 months, and 23.1% breastfed exclusively at 6 months. New Jersey's rates exceed the national averages for breastfeeding initiation, breastfeeding at six months, and exclusive breastfeeding at six months. Two WIC strategies are to discuss the importance of exclusive breastfeeding with pregnant women and to always present exclusive breastfeeding as the norm.

Many women who will return to work or school after delivery think that they need to “do both,” that is, breastfeed and give formula right from the beginning. This is a huge barrier to overcome. Staff will continue to address this practice with participants and provide information about the Patient Protection and Affordable Care Act (health care reform), which requires employers “to provide ‘reasonable break time for an employee to express breast milk for her nursing child for 1 year after the child’s birth each time such employee has need to express the milk’” and “to provide ‘a place, other than a bathroom, that is shielded from view and free from intrusion from coworkers and the public, which may be used by an employee to express breast milk.’”

BREASTFEEDING DURATION

Support services for breastfeeding women target the individual woman's needs and goals. Breastfeeding staff is available during newborn certification and check pick-up appointments and peer counselors are available outside clinic hours to assist women with questions or problems. WIC provides educational literature in English and other languages and breast pumps when mothers need them.

Breastfeeding duration increases when breastfeeding is protected. Protecting breastfeeding includes providing mothers who desire to breastfeed their low birth weight infants and infants with medical problems the individual support and assistance they need to establish and maintain their milk supply until their infants are able to feed at the breast; contacting new mothers at home just after discharge from the hospital to answer any questions; and helping women to dialogue with employers to accommodate pumping when they go back to work.

SECTION IV: FFY 2017 NUTRITION EDUCATION RESOURCES

OVERVIEW

The State agency lesson plans in this section are designed for use in both individual and group settings. The lessons are appropriate for groups of mixed status and suggestions are included for tailoring content to meet the needs of the audience. The ethnic distribution of New Jersey's population was considered and lessons were designed to be culturally sensitive. New Jersey WIC Services further recognizes the cultural and ethnic diversity of the State's WIC population and encourages local WIC agencies to employ a variety of counseling and educational strategies to meet the unique needs of their participants. Local agencies are encouraged to utilize participant-centered lessons developed from other States before developing their own. Previously developed lessons include Nutrition Education provider suggestions with a focus on interactive, participant-centered learning, utilizing facilitated discussion and motivational interviewing techniques. All lessons include objectives, suggested materials and methods, a course outline and timetable, references, website links to downloadable materials and evaluation and reporting forms. Lessons can be found on SharePoint or on WIC Works.

WIC nutritionists and CPAs are expected to be familiar with the various educational methods and techniques recommended in these pages. New Jersey WIC Services continues moving away from a lecture style education class to a facilitated discussion format. Included in this section is a summary of some behavioral approach theories which can be applied to the delivery of nutrition education and a list of continuing education and training opportunities for WIC CPAs related to nutrition assessment, education, and counseling. New Jersey WIC Services encourages local agency coordinators to provide all professional staff access to these trainings and/or to require that staff receive training following internal monitoring or performance review that identifies skill deficiencies.

BEHAVIORAL APPROACH THEORIES

FACILITATED GROUP DISCUSSION

Facilitated Group Discussion (FGD) is a style of providing nutrition education, which results in greater potential for behavior change and compliance. Participants have a greater potential for behavior change when given the opportunity to be influenced by their peers in an interactive approach rather than a lecture style presentation with a "nutrition expert." In FGD, participants meet in a group and discuss specific nutrition related topics, sharing their knowledge with one another. The nutrition educator leads the discussion by posing open ended questions and encouraging clients to discuss among themselves their unique approaches to the nutritional problems posed during the session. This allows clients to receive and exchange nutrition information within a supportive environment that respects their culture, prior experience, and personal concerns. The CPA or facilitator directs the discussion, clarifies points, corrects misinformation in a supportive way, and summarizes the key points of the discussion

for participants. Several resources are available to assist local agencies: a facilitated discussion template, guide, sample outlines and icebreakers. These resources are available electronically on the NJ WIC SharePoint. Group education should be offered by language so that participants can interact with one another.

MOTIVATIONAL INTERVIEWING (MI)

Motivational interviewing is a client-centered, directive method for enhancing intrinsic motivation to change by exploring and resolving ambivalence. It is a way of eliciting self-motivation in order to actively engage the client in the behavior change process. It does not assume that the individual necessarily has a desire to change and therefore the role of the educator is to support individuals in resolving ambivalence and progressing through the stages of change. MI gives individuals autonomy to move through the stages of change and it enhances internal attribution. The theory is based upon and builds on the Stages of Change Theory.

Gary Rose, PhD, developed a guide to help WIC counseling staff with the steps of motivational interviewing. The steps are to introduce the topic and ask permission; elicit concerns; discuss concerns and determine how important it is for the client to make a change; negotiate a plan for change and how confident the client is about successfully making the change; and offer and recommend follow-up. Rapport is built throughout this process.

NJ WIC is now offering on line training, Step-by-Step: Client-Centered Skills for WIC Counselors by Molly Kellogg. The Step-by-Step program includes podcasts along with written information that can be printed. It focuses on open-ended questioning, affirming and reflecting to provide staff the opportunity to improve their client centered skills. It is recommended that the units are worked on slowly over the course of several weeks. This allows staff to practice one skill at a time. The lessons are also good to use for reinforcement and review of motivational interviewing for staff who have been using the techniques since the implementation of VENA and Grow and Glow. The program is open to all staff. Counseling staff will be required to complete at least one of the 5 units in **FFY 2016/2017**. These can be done individually or in groups. The link to access the Step-by Step program is: <http://www.mollykellogg.com/products/step-by-step-wic-log-on/> and when prompted enter the password: WIC cares

PARTICIPANT-CENTERED NUTRITION EDUCATION (PCE) TOOLKIT

The Participant-Centered Nutrition Education (PCE) Toolkit was developed to assist states with the assessment of PCE readiness and provide guidance and resources for the planning and implementation of the PCE Model. The toolkit includes:

- **The PCE Model**, developed by Altarum in collaboration with the Western WIC PCE Steering Committee.
- **Assessment Tools** to assist State and local WIC programs to assess their readiness to implement PCE, identify their current environment and service delivery in relation to the PCE model.
- **A video** providing a visual example of applying PCE skills in a WIC clinic setting.
- **A resource guide** to aid state and local WIC programs identify currently available resources to help implement PCE.

- **Two literature reviews**, one examining the principles of PCE and a second describing the use of distance learning tools for paraprofessional staff.

Copies of the toolkit components are available at: <http://www.altarum.org/WICPCETools>

E-mail: WICPCE@altarum.org

THE STAGES OF CHANGE MODEL

The Stages of Change model was developed by Prochaska and DiClemente³ as a framework to encourage clients, in clinical settings, to develop motivation to change their behavior. Since then, McNamara⁴ (1998) has adapted the model so that it can be applied to both clinical and educational settings:

Stage 1: Pre-contemplation: Client sees no problem but others disagree.

Stage 2: Contemplation: Client knows they should change. Client weighs the pros and cons of changing.

Stage 3: Preparation: Client makes a choice to change their behavior and initiates small steps.

Stage 4: Action: Client puts the decision to change into practice.

Stage 5: Maintenance: Client actively maintains change.

Stage 6: Relapse: Client returns to previous behavior.

EMOTION-BASED MESSAGES

TOUCHING HEARTS, TOUCHING MINDS

The Massachusetts WIC Program found that logic and fact-based nutrition education approaches were not leading to the behavior change expected in their participants. They applied for a USDA WIC Special Project Grant in 2003 to develop materials and counseling strategies that highlight the emotional benefits of taking action, along with logic and fact, to help change behavior. They found that:

- People are feeling machines that think, not thinking machines that feel.
- Rational thought is important but feelings are more important than facts.
- **Behavior change is more likely to happen when we speak to people's feelings and highlight the emotional benefits of taking action along with logic and fact.**

They conducted focus groups with WIC mothers and identified the emotions that drove behavior. They translated these emotional pulse-points into thirty-three emotion-based educational messages. The results of the project are encouraging and many other programs are integrating these materials into their programs.

All thirty-three handouts are available in **English, Spanish, Vietnamese, Portuguese, Chinese, French, and Russian**. The materials are arranged by topic and available for printing

3. Prochaska JO, DiClemente CC. Transtheoretical therapy toward a more integrative model of change. *Psychotherapy: Theory, Research and Practice*. 1982;19(3):267-287.

4. McNamara E. The theory and practice of eliciting pupil motivation: Motivational interviewing - a form teacher's manual and guide for students, parents, psychologists, health visitors and counsellors. Ainsdale, Merseyside. Positive Behaviour Management. 1998.

from the 2010 Training and Resource CD in the folder called Emotion Based Handouts or directly from the Touching Hearts, Touching Minds website at <http://touchingheartstouchingminds.com>.

Tips for using emotion-based counseling:

1. Engage people before launching into counseling. Think of people not as participants, clients, or message targets but people who, like you, want to be the best they can be.
2. When meeting with clients, keep in mind what you are really trying to achieve together. Make them feel comfortable and connected; respect and honor them as individuals, and connect desired behaviors to practical steps to achieve success.
3. Be positive! People find positive energy appealing. Comfortable, soothing, light, fun, fresh, upbeat, active, vibrant and invigorated are words associated with positive energy.

For more tips on using these materials, a training video and other implementation tools, visit <http://touchingheartstouchingminds.com/tools.php>.

BABY BEHAVIOR

California WIC partnered with the University of California Davis Human Lactation Center to investigate why inappropriate feeding practices among participants persist despite extensive infant feeding education offered by WIC. Several important themes emerged in those preliminary studies. Most participants believed breastfeeding was best for their infants; yet, many also believed early introduction of formula and solid foods was needed to address perceived indicators of infant hunger such as infant crying or night waking. Many of the parents participating in the studies had unrealistic expectations for their infants' behavior and expressed their desire to have a "full," quiet, sleeping child even in the first few weeks after their babies were born.

In order to prevent over and inappropriate feeding among participants, staff from the UC Davis Human Lactation Center developed a curriculum and educational tools to help WIC families and staff members understand more about normal baby behavior. The Fit WIC Baby Behavior Study, funded by a USDA Special Project Grant, was a multi-center study conducted from 2006 to 2009.

Baby Behavior training helps staff to promote Parent Interaction by teaching families to identify infant states, cues, crying and sleep.

The modules and tools are located on the California WIC website:
<http://www.cdph.ca.gov/programs/wicworks/Pages/WICCaliforniaBabyBehaviorCampaign.aspx>

Evaluation of the Baby Behavior training revealed that Local Agency staff desired appropriate handouts to give to the participants. The State WIC Office is working with BrushArt to create a customized handout to reinforce the Baby Behavior messages of Sleep, Hunger Cues, Disengagement Cues and Crying. These handouts will be available in FFY 2017.

TRAINING OPPORTUNITIES

NJPARENTLINK

NJParentlink Workshops are held throughout the year or may be provided to staff at the local agency. Professional Development Opportunities with *NJ Parent Link*: NJ's Web Based Early Childhood, Parenting & Professional Resource Center Workshop Description: A fun, interactive workshop on the use of NJ Parent Link, New Jersey's web-based resource for parents and child/family support professionals. <http://www.njparentlink.nj.gov>

New Jersey's child health, development, early learning, parenting and family support services and resources are presented, and community building, networking and systems communications strategies are also discussed. Included in the full day workshop is a child & family case study practicum providing guided time and assistance for hands-on practice with *NJ Parent Link* as a comprehensive professional IT resource tool. Family intake/assessment strategies and various web-based tools are reviewed to improve client/provider communication and outcomes.

WIC LEARNING ONLINE

The WICworks Resource System website offers WIC Learning Online, which has online courses to train all levels of WIC staff. Topics include VENA: Connecting the Dots between Assessment and Intervention, WIC Baby Behavior Basics, The Essentials of Budgeting for Non-Finance Professionals, Interpersonal Communication: Listening Skills, WIC 101, WIC Breastfeeding Basics, Value Enhanced Nutrition Assessment, Feeding Infants: Nourishing Attitudes and Techniques, Communicating with Participants. CEUs available for nurses and dietitians. <https://wicworks.fns.usda.gov/wic-learning-online>

The Sharing Gallery has trainings developed by other states under Special Project Grants, such as the Pennsylvania QWIC LEARN, a series of e-Learning modules focused on staff skills in conducting VENA in the WIC setting with focus on developing and measuring competencies and skills. <https://wicworks.fns.usda.gov/>

OPEN WIDE: ORAL HEALTH TRAINING FOR HEALTH PROFESSIONALS

A series of four self-contained online modules designed to help health and early childhood professionals working in community settings (for example, Head Start, and WIC staff) promote oral health in the course of promoting general health for infants, children, and their families. The modules present professionals with information about tooth decay, risk factors, and prevention; explain how to perform an oral health risk assessment and oral health screening; and highlight anticipatory guidance to share with parents.

<http://www.mchoralhealth.org/OpenWide/>

Additional Oral Health training module: <http://www.smilesforlifeoralhealth.org/>

WHOLE GRAINS: HEALTH PROFESSIONAL RESOURCES

Self-Study guide: *Whole Grains and Health-Get the Whole Story*: This is an online continuing education program that summarizes the research about whole grains and chronic disease. It is approved for continuing education credits for AAPA, AAFP, and CDR. Go to

http://www.cecacity.com/generalmills/whole_grain07/disclaim.htm to take the course online for credit. Those without internet access can access the training on the 2008 Nutrition Resource CD in the Staff Training File under Whole Grains.

NUTRITION SERVICES (NS)

The National Maternal Intensive course sponsored by the University of Minnesota School of Public Health offers the latest topics related to improving pregnancy outcomes. The course and credits are available on-line individually and in groups, from September 1, 2016 through November 30, 2016. The State is planning VENA and Grow and Glow refresher training. The State will be focusing on the NJ WOW system implementation in FY 2017, and training will be provided statewide to local agency staff.

BREASTFEEDING TRAINING

Breastfeeding peer counselors must successfully complete the New Jersey WIC Services Breastfeeding Peer Counselor Training course, which is based on the *Loving Support*® through *Peer Counseling: a Journey Together* Curriculum. This course is a minimum of 18 hours of classroom work after which new peer counselors are paired with experienced staff for ongoing mentoring. The State Peer Counselor Coordinator with assistance from local agency breastfeeding coordinators will conduct this training as needed throughout the year.

Local agency breastfeeding coordinators provide at least one in-service each year for their agency staff.

Using Loving Support to GLOW and GROW in WIC: Breastfeeding Training for Local WIC Staff (described in Section I) will continue as the standard for training all new WIC staff on breastfeeding.

LIMITED ENGLISH PROFICIENCY (LEP) RESOURCES

The U.S. Department of Justice has developed a website www.lep.gov where agencies can find resources for serving LEP individuals and communities. The site contains “Know Your Rights” brochures, “I Speak” flashcards, and resources for translators and staff training materials. I speak cards are at: <http://www.lep.gov/ISpeakCards2004.pdf> and agencies also utilize the Language Line as a translation resource. A new Language Assessment resource available:

http://www.lep.gov/resources/2011_Language_Access_Assessment_and_Planning_Tool.pdf