

The Digest

A Dietetic Practice Group of the American Dietetic Association

Fall 2001

Health and Nutrition in Child Care Programs: A Head Start Model

By Keecha Harris, MPH, RD

"Historic Overview"

Head Start is one of several federally funded programs aimed at mitigating the effects of poverty. Beginning in the summer of 1965 as a pilot project, Head Start today serves over 916,000 children of low-income families in the United States and its territories with a \$6.2 billion annual budget.



Head Start is a comprehensive, early childhood development program that serves low-income, pregnant women, infants, children, and families. The program also serves children with disabilities and their families. Grantees are charged with identifying the social, cognitive, health, and emotional needs of young children and providing appropriate services to assist families in meeting those needs.

Head Start is regulated by the Head Start Bureau (HSB) of the Administration for Children and Families (ACF) in the Department of Health and Human Services (HHS). The primary goals are to deliver comprehensive, high quality services designed to foster healthy development in low-income children and to respond to each

family's unique developmental, cultural, and linguistic heritage with developmentally appropriate practices. Each grantee is formally evaluated on their efforts to fulfill these goals every three years. The standards by which they are evaluated are the Performance Standards of the Administration for Children and Families, which define the services that programs are to provide to the children and families that they serve. They constitute the expectations and requirements that grantees must meet.

Traditionally recognized as a provider of services to preschoolers, Head Start also includes Early Head Start, which provides comprehensive services to pregnant women, infants, and toddlers. The concept behind the Early Head Start Program is not new, having as its roots the Parent Child Center pilot that was implemented in 1970. In 1995, funds were appropriated for the implementation of Early Head Start Programs and the number of these programs has steadily increased to over 600. The Early Head Start program expands the benefits of early childhood development to low-income families with children under age 3 and to pregnant women. In fiscal year 2001, the program will serve approximately 55,000 infants and toddlers with a budget of \$560 million. A preliminary evaluation of Early Head Start indicates that participants perform significantly better in cognitive, language and social-emotional development compared to peer-matched non-participants.

The purpose of this article is to examine health and nutrition-related regulations that govern Head Start programs and to present the Jefferson County Committee for Economic Opportunity Head Start/Early Head Start Program as a model for the delivery of health and nutrition services.

The Jefferson County Committee for Economic Opportunity (JCCEO) Head Start Program began in 1965 and was one of three national sites selected as a pilot for the Parent Child Center model. Today, JCCEO Head Start/Early Head Start Program is a recognized Program of Achievement by the National Head Start Association. This quality designation recognizes the collective efforts of a local program and the supporting community to model the implementation of systems stipulated by the Performance Standards. With a funded enrollment of over 1500, this program solicits and utilizes the strengths of other community-based organizations, academia, health care, and other entities for the delivery of services to enrollees. In the 2001 federal review of the JCCEO's adherence to the Performance Standards, no findings were cited. This is the highest performance on a review in that optimal compliance was observed and that there were no areas of noncompliance in the three domains of programmatic functioning: Early Childhood Development and Health Services, Family and Community Partnerships, and Program Governance.

(continued on page 3)

INSIDE this Issue of The Digest

Health and Nutrition in Child Care Programs	p 1	Infant Feeding Beliefs & Practices in India & Bangladesh	p 8	Linking Nutrition Education with Farms	p 10
Letter from Chair/Editor's Note	p 2	Innovative & Fun Approaches to Nutrition Education for Children	p 9	Soyfood Nutrition Education	p 11
Networking News	p 5	Take Five: Promoting 5-A-Day for Better Health	p 9	From the Bookshelf	p 11
Nutrition in Child Care and School Settings	p 7			Training and CPE Opportunities	p 12

PHCNPG '01-'02 Newsletter Editorial Committee

Newsletter Editors

Christina Ferroli, PhD, RD
Consumer and Family Sciences Dept.
Purdue Extension-Marion County
9245 N. Meridian St., Suite 118
Indianapolis, IN 46260-1874
317/848-7351 (ph), 317/848-7229 (fax)
christina.ferroli@ces.purdue.edu

Josefine Wendel, MS, RD
1480 Cambridge St.
Cambridge, MA 02140-3509
617/661-1599 (ph)
jwendel@mediaone.net

Assistant Editor/Networking News Editor

Jane Baxter, MS, RD, LDN
rjbaxter1@earthlink.net

Web Site Editors - Vacant

Contributing and Copy Editors

Elizabeth Cowie, MS, RD
Meera Ramesh, MS, RD, LD
Margaret Lewis, MHE, RD

Editorial Review Board

Chair

Carolyn Gleason, MS, RD
HRSA/MCH, Seattle Field Office
2201 Sixth Ave., RX-27, St. 700
Seattle, WA 98121
206/615-2486 (ph), 206/615-2500 (fax)
cgleason@hrsa.gov

Past Chair

Doris Fredericks, MEd, RD, FADA
Choices for Children
307 Orchard City Drive, Suite 107
Campbell, CA 95008
408/374-2232 (ph), 408/364-6855 (fax)
doris@c-path.com

Chair Elect

Betsy Haughton, EdD, RD
8606 Wimbledon Drive
Knoxville, TN 37923-5808
865/974-6267 (ph), 865/974-3491 (fax)
haughton@utk.edu

Secretary/Treasurer

Phyllis Allen, MS, RD, MPH
Office of Public Health Nutrition
2600 Bull Street
Columbia, SC 29201
803/898-0802 (ph), 803/898-0557 (fax)
allenpa@columb60.dhec.state.sc.us

ADA Liaison

Kim Pedroza, RD
Manager, Dietetic Practice Team
The American Dietetic Association
216 West Jackson Boulevard, Suite 800
Chicago, IL 60606
800/877-1600 x4725 (ph), 312/899-4812 (fax)
kpedroza@eatright.org

Advisor

Alice Lenihan, MPH, RD, LDN
Nutrition Services Branch
North Carolina Department of Health and
Human Services
P.O. Box 10008, Raleigh, NC 27605-0008
919/715-0636 (ph), 919/733-1384 (fax)
Alice.Lenihan@ncmail.net

The views and statements appearing in The Digest do not necessarily reflect policies and/or official positions of The American Dietetic Association or Public Health Community Nutrition Practice Group.

© 2001 Public Health/Community Nutrition, a dietetic practice group of the American Dietetic Association.

Letter from the Chair

Fall is here and it's a busy time for all of us – back to school, fall sports and, yes! the ADA Food and Nutrition Conference and Exhibition. Two of the major themes for this year's meeting are obesity and genetics – issues of major concern for public health and community nutrition professionals. We are sponsoring, along with the Nestle Company, an educational session on use of the BMI and “new” CDC growth charts, with special emphasis on children with special health care needs and adolescents. We are fortunate to have the great expertise and experience of dietitians Cris Trahms and Harriet Cloud, joined by Dr. Rich Kriepe. If you are going to the FNCE, don't miss this great session!



We also sponsor great networking opportunities for public health and community dietitians at the FNCE. Our business meeting is always inspiring as we share what is going on in the practice group and among the members. General Mills is sponsoring our reception this year, a chance to meet and greet colleagues from around the country (and sample some terrific food). Of course, the Dannon Institute/PHCNPG Breakfast is always a big hit – start the day off with a nutritious meal, good friends and an update on the recognition of outstanding community nutrition efforts.

This year we are honoring Mary Story as our Outstanding Dietitian of the Year. Congratulations, Mary, and thank you for years of research, teaching, mentoring, and leadership in public health and community nutrition! Join us in recognizing Mary at our FNCE events.

DPG has taken the lead in promoting breastfeeding by practicing what we preach – offering a pleasant, private place for breastfeeding mothers during the conference. We even offer pumps, thanks to Medela. The Dannon Company and Ocean Spray help fund the room and they make sure the moms have nutritious snacks. Doris Fredericks, our Past Chair, is coordinating this year's Mother's Room. It's a great opportunity for volunteers!

Fall means one more thing for PHCNPG – nominations for officers. If you are interested in opportunities to expand your professional experience, work with terrific colleagues, and serve your association, drop our Nominations Committee Chair a note – call or write Sally Swartz, at 303-846-6273 or swartz@tchd.org.

Editor's Note

As the hot and humid days of summer turn into crisp, clear, cool days of fall, we are reminded of the start of school, new clothes, and school supplies, yellow buses, rowdy football games and homework! How fitting then for the fall issue of The Digest to showcase nutrition in schools and child care programs.



I am very pleased to have the lead article highlight the Jefferson County Head Start program in Birmingham, Alabama. Head Start is a federally-funded program targeting early childhood development by providing comprehensive health services to preschoolers. Its sister program, Early Head Start, provides

health services to pregnant women, infants and toddlers to help mitigate the effects of poverty early on.

This issue's Networking News is a series of articles describing innovative, nutrition programs that reach children in a variety of settings. In Tennessee WIC Program clinics, nutritionists provides children with nutrition-related games, singing, puppet shows, art activities, puzzles and cooking. What fun!

Take Five – Promoting 5-A-Day for Better Health program in Union County, New Jersey, reaches 4,000 elementary students in grades 2-5. Kids learn about produce – how it grows, history/geography, nutritional content/importance in diet and best of all they get to taste the produce!

Lastly, perfectly timed for the fall, Rutgers Cooperative Extension is reconnecting families with their local agriculture through a nutrition and farm education initiative called From Our Farms. Riding the crest of a popular nationwide movement dubbed Community Supported Agriculture, From Our Farms is an interactive program packaged into learning boxes that teaches children and their parents about the importance of local food, nutrition and agriculture.

Hope you all have a lovely fall!

Christina Ferroli

HEALTH AND NUTRITION IN CHILD CARE PROGRAMS: A Head Start Model

(continued from page 1)

Health Services In Head Start

As a comprehensive early childhood development program, Head Start has one feature that uniquely distinguishes it from almost every other child development program: the provision of health services. Each enrollee is entitled to comprehensive health services that meet identified needs through an established screening process. The services stipulated by the Performance Standards include general health screening, hearing and vision screening, nutrition referrals and intervention, dental services, and mental health services. The Performance Standards require that "nutrition services must be supported by staff or consultants who are registered dietitians or nutritionists [1304.52(d)(3)]." Additionally, the Performance Standards require that "mental health services must be supported by staff or consultants who are licensed or certified mental health professionals with experience and expertise in serving young children and their families [1304.52(d)(4)]."



JCCEO's unique model of health service delivery is reflective of its capacity to partner with the extensive health and medical network in Birmingham. Regarded as the medical capital of the state, Jefferson County has comprehensive health and medical systems that includes thirteen hospitals and eight public health centers. Most notable among the medical and health resources is the University of Alabama at Birmingham Health System that is regarded as one of the nation's leading quaternary care centers. Additionally, there are numerous privately operated public health providers. This exceptionally rich concentration of service providers in a metropolitan area of over 1 million people affords unique partnerships that JCCEO enrollees benefit from.

JCCEO has established a number of partnerships that support a model for the provision of health services. Through interagency collaborations, an on-site health clinic and on-site dental and developmental screenings are provided. Other partnerships include mental health services and primary management of inborn errors of metabolism by the Sparks International Research Center;

WIC referrals, dental examinations, and primary care provision by the Jefferson County Health Department; and research efforts with Georgia State University and the University of Alabama at Birmingham. Additionally, the maintenance of an active Health Services Advisory Committee (HSAC) contributes significantly to the quality of services provided. The HSAC, required by the Performance Standards, is intended to provide anticipatory guidance and support for health-related policies, procedures, and activities. Members include parents, program staff, and medical and health practitioners.

Upon enrollment, comprehensive health data is collected on each enrollee, including the perinatal history, developmental and psychosocial screening results, and a comprehensive nutrition history. Additionally, the results of a physical and dental exam are also utilized to develop individualized care plans that include referrals and intervention. Among health issues addressed by the JCCEO Head Start program are asthma, orthopedic impairments, anemia, overweight, underweight, dental caries, developmental and behavioral delays, lead poisoning, and phenylketonuria.

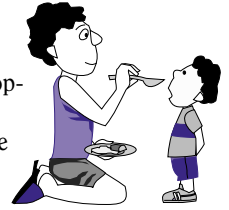
Head Start Programs receive financial and in-kind support from a variety of sources and do not legally require any form of payment for basic services. Health care is one such service. The desired primary form of payment to providers of medical and health services for all enrollees is medical insurance. Each Head Start Program has the responsibility of identifying the family's source of insurance and primary care. If the enrollee is without either adequate insurance or a medical home, it is the responsibility of the Program to assist her/him with these needs. Otherwise, the grantee is expected to cover preventive service expenditures related with the enrollee's health needs.

Head Start Performance Standards require that 10% of enrollment opportunities be afforded to children with special health care needs (CSHCN). In Head Start, most CSHCN have been identified upon enrollment and are accounted for early in the enrollee selection process. However, among Early Head Start infants and toddlers, most developmental delays are not identified and addressed until after enrollment due to the age of the participants. This makes it challenging to enroll enough CSHCN in Early Head Start Programs and to budget for health related expenditures, which are

essential for adherence to enrollment regulations.

Nutrition Services in Head Start

If good health drives education, then nutrition fuels health in early childhood development and pregnancy. Head Start families are disproportionately affected by food insecurity and adverse health problems related to nutrition. Intervention and prevention in this vulnerable population is indicated for enhancing health outcomes through nutrition education and the provision of a variety of nutritious foods.



It is incumbent upon individual programs to seek a share in the \$32 billion that the United States Department of Agriculture has allocated for fiscal year 2001 for food and nutrition services for this population through the Child and Adult Care Food Program (CACFP). Next to labor expenses, food service is the second most costly expenditure incurred by Head Start Programs. Thus, the Performance Standards require programs to seek support for meal provision through the CACFP. Limited funding is available through the Head Start Bureau for meal provision. This funding is generally reserved for covering meal costs for teaching staff and volunteers.

A number of Head Start Programs receive food service through schools where Head Start classrooms are located or through a contract food service arrangement. One general challenge encountered by programs that do not control their own menus is adherence to CACFP meal pattern guidelines and to Head Start regulations that limit the amount of sugar, salt, and fat served to enrollees. Any contractual agreement for food service should address these issues and performance monitoring is indicated. Additionally, foods that broaden the experience of the enrollee should be included in menus.

Nutrition education is a requirement of both the CACFP and Head Start. The CACFP provides nutrition education resources to programs for the staff and for enrollees. Head Start requires nutrition education for enrollees, parents, and staff. Specific nutrition education policies vary among programs. However, best practice indicates that nutrition education is included as a daily part of the curriculum. Nutrition education activities do not always

(continued on page 4)

HEALTH AND NUTRITION IN CHILD CARE PROGRAMS:

(continued from page 3)

have to include food and can be as simple as utilizing a teachable moment with a picky eater or as elaborate as a fruit and vegetable play. Efforts to educate parents range from education materials printed on the backs of menus to workshops to medical nutrition therapy. Staff education is generally accomplished through annual training. The Cooperative Extension Service is an invaluable resource of educational materials and for workshop facilitation.

The identification of nutrition needs is required for each enrollee in Head Start, and is ideally conducted by a registered dietitian or a nutritionist. Height and weight data, hemoglobin or hematocrit, and a nutrition history are collected for each enrollee. Though many programs are fastidious about identifying nutrition-related needs, questions remain among local programs about how to address and document efforts related to problems like overweight, anemia, or food insecurity, and these are arguably the most commonly cited finding in federal reviews.

Common nutrition-related health problems observed among JCCEO enrollees include overweight, anemia, underweight, lead poisoning, and inadequate intake. Select enrollees whose body mass index and weight for height percentiles are less than the third percentile or greater than the ninety-seventh percentile are referred to see a nutritionist at the Children's Hospital of Alabama for in-depth nutrition counseling. Since most insurance plans used by families do not cover medical nutrition therapy, these expenses are covered by JCCEO. Enrollees whose hematocrit levels are less than 34 received educational materials and are rechecked after six months enrollment in the program by the primary care provider or at the on-site clinic. In general, most anemia cases are resolved upon follow-up. Also, JCCEO partners with the Citizen's Lead Education and Poisoning Prevention Program to screen all children for lead over the age of one with no prior record of testing. Appropriate services and education are provided as indicated.



Implications for Practitioners: Partnership Opportunities

Nationally, there is a growing demand for health and nutrition consultants to child care. This demand will grow as the number of Early Head Start grantees increases, the results of birth-to-five research initiatives are expounded upon, and as states continue to expand performance expectancies in child care. Additionally, with an endorsement of the nutrition expert as a standard operational resource by the Performance Standards, Head Start has sent a strong message about its perceived value of the nutrition profession. As such, opportunities for nutrition practitioners in Head Start and Early Head Start generally fall under one of five domains: volunteering, consulting, employment, contracting, and research.

The primary volunteer activity available to dietitians and nutritionists is to serve on the HSAC. In general, meetings are held a minimum of two times per school year. Additional opportunities exist for volunteering in the classroom with nutrition education and other day-to-day activities. Registered Dietitians who have participated in the JCCEO HSAC include representatives from the health department, tertiary care facilities, child nutrition programs, and academia.

There are a number of consulting opportunities in Head Start programs that do not have a full-time Registered Dietitian or nutritionist employed. It is not uncommon for these arrangements to result in employment opportunities. The range of activities for dietitians and nutritionists varies from menu review to diet instructions to the identification of nutrition needs. As a courtesy and benefit to the practitioner and the program, any consulting opportunity should be supported by a contract that specifies the type of services to be provided and the number of hours to be spent on these activities. During the federal review process, programs

will find that contracts prepared in this format are preferred to verbal arrangements or non-specific personal service contracts.

Contractual interagency agreements between Head Start Programs and health agencies are another opportunity for partnership. As with personal service contracts, these contracts should provide as much detail as possible. Any reciprocity of service, such as Head Start referrals of WIC eligible child, should be noted as well.

There are a number of research and evaluation opportunities that have opened as a result of the Government Performance and Results Act (GPRA) of 1993 and the Head Start Performance Measures. These acts are both reflective of the government's desire for quantitative, objective measures to guide program planning and implementation. As such, Head Start Programs are in need of individuals with expertise in research and program evaluation.

Summary

Head Start provides a model for the delivery of comprehensive early childhood development services. Head Start is uniquely distinguished from other child development programs in its approach to the provision of health and nutrition services. The Jefferson County Committee for Economic Opportunity Head Start/Early Head Start Program uniquely utilizes the health resources and serves as a model for the implementation of health services. Numerous opportunities exist for Registered Dietitians in Head Start and child care to meet the growing demand for people with health and nutrition expertise.

Resources:

1. Head Start Performance Standards. US Department of Health and Human Services.
2. Head Start Bureau website: <http://www2.acf.dhhs.gov/programs/hsb/index.html>
3. Child and Adult Care Food Program website: <http://www.fns.usda.gov/cnd/care/cacfp/cacfp-home.html> ■

VOLUNTEERS NEEDED FOR MOTHER'S ROOM AT FNCE

Are you planning on attending the 2001 ADA Food and Nutrition Conference and Exhibition? If so, PHCNPG has a great opportunity for you! Once again this year, the Public Health/Community Nutrition Practice Group will be sponsoring the Mother's Room (aka Breastfeeding Room). Volunteers are needed to "chaperone" the room in one hour shifts Saturday evening through Tuesday during the meeting. No breast pumping or breastfeeding experience is necessary! Last year's volunteers stated that it was a great way to take a break from the meeting, rest tired feet, and look through all the exhibition goodies.

To volunteer or for more information, contact Doris Fredericks, at (408-297-3295 ext. 241 or doris@c-path.com)

Networking News

Area and Overseas Network Coordinators and Their State Networkers

Area and Overseas Coordinator Responsibilities



Each Area Coordinator is responsible for one region of the country, which usually covers 6-8 states, or the overseas area. Each state has one State Networker. Area Coordinators serve as the link between the PHCNPG Executive Committee and the PHCNPG State Networkers. They are responsible for disseminating information to the State Networkers regarding public relations, legislative issues, new member lists and surveys, and other business matters. They also solicit articles for the Networking News in the Digest, our quarterly newsletter, from the state Networkers.

State Networker Responsibilities

Each State Networker serves as the link between the Area Coordinators and their respective states' PHCNPG members. They are responsible for disseminating all information received from their Area Coordinators to their state members. They also arrange displays at professional meetings and promote PHCNPG membership. The State Networkers identify persons to contribute articles for Networking News to share interesting ideas on actual programs/services/activities and experiences with other members.

PHCNPG NETWORK - Committee Directory April 10, 2001

NATIONAL NETWORK

COMMITTEE CHAIR
SHERRY CLARK (512) 458-7444 (W)
 Texas Department of Health (512) 268-1684 (H)
 Bureau of Nutrition Services (512) 458-7446 (FAX)
 1100 West. 49th Street sherry.clark@tdh.state.tx.us
 Austin, Texas 78756

AREA I

AREA I COORDINATOR
MARIANA BOWMAN (818) 500-0504 (H)
 531 Fischer St. Apt. 3 mc248@email.byu.edu
 Glendale, CA 91205-5026

ALASKA VACANT

CALIFORNIA
HOLLY WEBER (408) 288-6799 (H)
 555 So. 12th Street (408) 792-5126 (W)
 San Jose, CA 95112-2354 Fax: (408) 288-5662
 burnit@concentric.net

HAWAII
MELISSA P. NIKAIIDO (808) 733-8057 (W) or
 6154 Wakine Place (808) 733-8056
 Honolulu, HI 96821 (808) 733-8061 (Fax)
 melissa@hgea.org

IDAHO VACANT

MONTANA
LYNN C. PAUL (406) 586-9582 (H)
 1304 Cherry Dr. (406) 994-5702 (W)
 Bozeman, MT 59715-5923 (406) 994-6314 (fax)
 lpaul@montana.edu

OREGON VACANT

WASHINGTON
CARRIE NELSON-PFAB (253) 850-3434
 28020 34th Avenue South (206) 296-8412 (fax)
 Auburn, WA 98001-1026 Carrie.Nelson-Pfab@
 METROK.C.GOV (W)
 eatveggies@juno.com (H)

WYOMING
CARRIE NELSON-PFAB
 (See above)



AREA II

AREA II COORDINATOR
KAREN BETTIN (517) 335-8957 (W)
 WIC Division (517) 339-8481 (H)
 Michigan Dept. of Community (517) 335-8835 (Fax)
 Health bettink@state.mi.us
 2150 Apollo Dr., P.O. Box 30195
 Lansing, MI 48909

IOWA
JUDITH SOLBERG (515) 281-3713 (W)
 Iowa Dept. of Public Health (515) 281-4913 (Fax)
 Bureau of Nutrition/WIC jsolberg@idph.state.ia.us
 321 East 12th Street
 Des Moines, IA 50319

MICHIGAN
ARLENE CAMPBELL (810) 667-0448 (W)
 2402 Academy Rd. (248) 634-5313 (H)
 Holly, MI 48442-8324 (810) 667-0232 (Fax)
 arlenecampbell@onemain.com

MINNESOTA
REBECCA E. LINDBERG (952) 967-6717 (W)
 4629 Arden Avenue (952) 929-0175 (H)
 Edina, MN 55424-1118 (952) 883-6767 (Fax)
 Rebecca.e.lindberg@
 healthpartners.com

MISSOURI
TAKAKO TAGAMI (573) 526-1369 (W)
 2103 Park DeVille Place (573) 445-4246 (H)
 Columbia, MO 65203 (573) 526-1470 (FAX)
 Tagamt@mail.health.
 state.mo.us

NEBRASKA
CINDY M. BRISON (402) 444-7872 (W)
 7518 Mary St. (402) 444-6430 (FAX)
 Omaha, NE 68122-1621 cbrison1@unl.edu

NORTH DAKOTA
 VACANT No practice group members
 in state

SOUTH DAKOTA
KRISTEN BISKEBORN (605) 734-4551 (W)
 SD Department of Health (605) 734-4552 (Fax)
 300 S. Courtland, Ste 109 Kristin.biskeborn@state.sd.us
 Chamberlain, SD 57325

WISCONSIN
DIANNE MOREAU-STODOLA (920) 448-5228 (W)
 Wisconsin Division of Health (920) 448-5265 (Fax)
 200 N. Jefferson St., Room 126 moreadm@dhfs.state.wi.us
 Green Bay, WI 54301-5182

AREA III

AREA III COORDINATOR

MARY CAMERON (601) 969-7890 (H)
2735 Hemmingway Circle (601) 984-6749
Jackson, MS 39209 ext. 5767 (W)
eve2be@aolcom

ALABAMA

MIRIAM J. GAINES (334) 285-7485
RSA Tower mgaines@adph.state.al.us
SUITE 1010
P.O. Box 303017
Montgomery, AL 36130-3017

ARKANSAS

VACANT

FLORIDA/PUERTO RICO

SUZANNE P. WILSON (850) 488-8985 (W)
Florida Department of Health (850) 922-3926 (Fax)
Bureau of WIC and Nutrition sue_wilson@doh.state.fl.us
Services
BIN-A #16
220 Capital Circle S.E.
Tallahassee, FL 32399-1726

GEORGIA

VACANT

LOUISIANA

DEBORAH B. VALENTI (504) 871-1313 (Phone)
1005 W. Robert St. (504) 871-1334 (fax)
Hammond, LA 70401 dvalenti@hhmail.dhh.state.la.us

MISSISSIPPI

ELVIE P. GUTHRIE-LEWIS (228) 831-5151
MSHD District 9 eguthrie@msdh.state.ms.us
P.O. Box 3749
Gulfport, MS 39505

SOUTH CAROLINA

VACANT



AREA IV

AREA IV COORDINATOR

MARY WASHBURN (785) 296-1322 (W)
734 SE Dupont Road mwashbur@kdhe.state.ks.us (W)
Tecumseh, KS 66542 lmwash@cjnetworks.com (H)

ARIZONA

SHARON SASS (602) 542-1886 (W)
Arizona Dept. of Health Services (602) 542-1890 (Fax)
Office of Nutrition Services sass@hs.state.az.us
1740 W. Adams Ave.
Room 208
Phoenix, AZ 85007

COLORADO

VACANT

KANSAS

SHERYL DREWIS (785) 256-4456 (H)
206 W 1st St Lot 3 sdrewis@prodigy.net
Topeka, KS 66615-9530 (785) 368-2040 (W)

NEVADA

VACANT

NEW MEXICO

VACANT

OKLAHOMA

VACANT

TEXAS

BARBARA KHALEEQ (806) 293-0182 (W)
3401 Garland St wic2000@door.net
Plainview, TX 79072 (806) 296-5714 (H)

UTAH

VACANT

AREA V

AREA V COORDINATOR

CINDY FITCH (304) 293-3486
1201 Brunswick Ct. (304) 293-2750 (Fax)
Morgantown, WV 26508-4808 cfitch@wvu.edu

ILLINOIS

VACANT

INDIANA

CAROLYN NAGLE (219) 665-5862
601 Westview Drive
Angola, IN 46703

KENTUCKY

FRANCES HAWKINS (502) 564-3827
987 Inverness Road (502) 564-8389 (fax)
Frankfort, KY 40601

OHIO

VACANT

TENNESSEE

RUBELYN MAYS (615) 741-0275
2415 Douglas Glen Lane (615) 532-7189 (Fax)
Franklin, TN 37064 rmays@mail.state.tn.us

WEST VIRGINIA

VACANT



AREA VI

AREA VI COORDINATOR

DONNA BLUM-Kemelor (703) 916-9125 (H)
6528 Jay Miner Dr. (703) 916-7631 (Fax)
Falls Church, VA 22041 razzjazzdb@aol.com

DELAWARE AND DC

DIANE M. OLIVER (302) 995-8693
Division of Public Health (302) 995-8689 (Fax)
2055 Limestone Road, Suite 115 doliver@state.de.us
Wilmington, DE 19808

MARYLAND

VACANT

NORTH CAROLINA

KATHLEEN LAMB (919) 715-0641
NCDHHS (919) 715-8795 (Fax)
Div. of Public Health kathy.lamb@ncmail.net
1914 Mail Service Center

Raleigh, NC 27699-1914

PENNSYLVANIA

LORRAINE MATTHEWS (215) 685-5263
Philadelphia Dept. of Public Health (215) 685-5257 (Fax)
1101 Market Street, 9th Floor lorraine.matthews@phila.gov
Philadelphia, PA 19107

VIRGINIA

MICHAEL A. DEANGELIS 571-633-0527 (H)
2159 Evans Court, Apt 203 571-633-0527 (Fax-call first)
Falls Church, VA 22043 202-973-5891 (W)
deangemi@aol.com

AREA VII

AREA VII COORDINATOR

LUANNE HUGHES (856) 881-4191 (Fax)
 Rutgers Cooperative Extension
 1200 N. Delsea Drive
 Clayton, New Jersey 08312

CONNECTICUT VACANT

MAINE VACANT

MASSACHUSETTS VACANT

NEW HAMPSHIRE

COLETTE JANSON-SAND (603) 862-1723(W)
 Human Nutrition Center
 Univ. of New Hampshire
 Durham, NH 03824
 (603) 862-0308 (Fax)
 chjs@unh.edu
 (603) 862-1704 (sec)

NEW JERSEY VACANT

NEW YORK VACANT

RHODE ISLAND

DARLENE DYMSZA (401) 434-5051 (H)
 New Bedford WIC (508) 997-1500 (W)
 874 Purchase (508) 990-7558 (Fax)
 New Bedford, RI 02740
 ciociwink@cs.com

VERMONT

MARY SHEA ROSEN (802) 257-9566 (H)
 1482 Hinesburg Road
 Brattleboro, VT 05301

OVERSEAS NETWORK

OVERSEAS NETWORK

COORDINATOR (613) 95945510 (Work)
MAGGIE NIALL (613) 95945509 (Fax)
 Monash Medical Center (613) 95216637 (Home)
 5th Floor, Building E
 Clayton Road
 Clayton, Victoria 3168
 Australia
 maggie.niall@med.monash.edu.au

FNCE Happenings!!!

Our friends at the Dannon Institute are once again joining the PHCNPG in offering the popular Dannon Breakfast at the ADA Food and Nutrition Conference and Exhibition. The breakfast will be held on Monday, October 22, 2001 at the America's Center from 6:45-7:45 am. If you are attending FNCE, please join us, and bring your friends!

The Digest Needs Web Site Editors

Do you enjoy surfing the web for interesting, useful and scientific-based web sites? Your fellow public health, community nutrition colleagues need your input and suggestions for the Web site column of The Digest. Please contact Christina Ferroli (Christina.Ferroli@ces.purdue.edu) or Josefina Wendel (jwendel@mediaone.net) if you are interested in the position.



Nutrition in Child Care and School Settings

Healthy Meals for Kids Away from Home

By Pamela Darby and Josefina Wendel

Sites Related to Nutrition in Child Care

www.nalusda.gov/childcare - The Child Care Nutrition Resource System provides recipes, resources and information on preparing nutritious meals and food safety.

[wysiwyg://205/http://www.eatright.org/adap0899.html](http://www.wysiwyg://205/http://www.eatright.org/adap0899.html) - American Dietetic Association position on Nutrition standards for child care programs.

<http://www.nncc.org/Nutrition/nutr.page.html> - Cooperative Extension System's National Network for Child Care site offers educational material regarding many nutrition issues facing those who provide food to children.

<http://www.nal.usda.gov/fnic/foodborne/fbidb/childcare.shtml> and
<http://www.nal.usda.gov/fnic/pubs/bibs/edu/98-child.html> - The Food and Nutrition Information Center developed these sites: a database of Food Safety Teaching Materials for Child Care Providers and a Food and Nutrition Resource list for Child Care and Preschool Staff.

Sites about the Child and Adult Care Food Program (CACFP)

<http://www.fns.usda.gov/cnd/care/cacfp/>

[cacfp.html](http://www.cacfp.html) - The USDA website provides detailed information about the child nutrition programs, including CACFP. Includes a listing of state contacts.

http://www.frac.org/html/federal_food_programs/programs/cacfp.html - The Food Research and Action Center, a Washington DC based advocacy group, offers lots of information about Federal Nutrition Programs, including the CACFP program. Has the latest legislative updates and a listing of CACFP state contacts.

Sites focusing on School Meals

<http://www.asfsa.org> - The American School Food Service Association site has information on school meals and CACFP, as well as information about research by child nutrition professionals. Plus a listing of management tools for School Food Service managers, including reimbursement rates and income eligibility guidelines.

<http://www.fns.usda.gov/oane/MENU/Publish ed/CNP/FILES/SNDAILfindsum.html> - The School Nutrition Dietary Assessment Study II: Summary of Findings.

<http://www.nalusda.gov/fnic/schoolmeals/resources/naproto.html> - Nutrient Analysis Protocols for the School Nutrition Program; manual for food service managers to use in

learning to select foods, create recipes, plan menus and perform nutrient analysis.

<http://www.eatright.org/school-based.html> - School-based nutrition programs and services; Position of American Dietetic Association, Society for Nutrition Education and the American School Food Service Association.

Electronic Mailing lists and Newsletters

A number of listservs or electronic mailing lists make it easy for busy child nutrition professionals and school food service staff to exchange information.

Mealtalk is an online discussion group for persons working with school food service and/or other Child Nutrition Programs. Sign up for the regular or digest version at <http://www.nal.usda.gov:8001/Discussion/subscribemealtalk.html>

Successtalk is an online discussion group for those interested in creating a healthy school environment, including school health professionals, child nutrition educators, teachers and parents. Subscribe at: <http://schoolmeals.nal.usda.gov:8001/Discussion/subscribesuccesstalk.html> ■

Infant Feeding Beliefs & Practices in India & Bangladesh

By Barbara L. Hoffman

Infant feeding beliefs and practices are formed from a mosaic of ethnic world views and socioeconomic opportunities. Several recent investigations into the infant feeding habits of Indian and Bangladeshi mothers provide a valuable knowledge base of nutrition practices and attitudes in the Indian Subcontinent. This brief review of literature is intended to challenge other public health dietetic professionals to better understand ethnic feeding perspectives in order to direct successful intervention programs.

Internationally recognized health agencies promote that infants should be exclusively breast-fed up to the age of 4 to 6 months for optimal growth and development (1, 2). Subsequently, various weaning foods should complement the infant's diet at appropriate time intervals to enable optimal growth. Scientific studies show that women of Bangladesh already adhere to such recommendations for breastfeeding. A longitudinal study of 110 young mothers in rural Bangladesh found that 100% of these mothers breast-fed their infants nearly daily from birth to one year (3).

Despite such excellent rates of breastfeeding, the prevalence of malnutrition-induced growth failure is among the highest in the world in the countries of the Indian Subcontinent (4). Educational efforts to increase infant nutrition must focus on the timing and types of weaning foods. Complementary with breastfeeding, Bangladeshi mothers supplement their infants' diet with liquid and semi-solid bottled foods in nearly 40% of infants by 2 months and 80% by 5 months (3). These bottled foods were predominantly half-strength cow's, powdered, or goat's milk; condensed milk; sugar water; rice or wheat gruel; and/or barley. A survey on infant feeding beliefs among Asian-Indian mothers, and



Breastfeeding

other ethnic groups, showed that these mothers agreed to statements that bottled sugar water makes for a healthier baby, acts as a sleep aid, and helps prevent colic (5). Contrary to these views, current medical advice cautions of detrimental health effects associated with the early introduction of cow's milk and sugary bottled liquids in a young child's diet (6).

Although infants are developmentally ready for pureed or mashed weaning foods at 4 to 6 months of age, the before-mentioned Asian-Indian mothers were found to disagree that foods given before 6 months need to be strained (5). Similarly, a food frequency questionnaire in rural Bangladesh found that only 5% of infants 6-months of age were offered weaning foods, mainly rice (3). By one year of age, vegetables were given in 12% of child days, while fish/meat, egg, dal, and fruits were each offered in less than 2% of child days (3). Reasoning for the delayed introduction of weaning foods may be justified by the belief held by Asian-Indian mothers that solid food eaten before 6 months of age causes liver disease (5).

Young women and mothers of the Indian Subcontinent appear to be eager to learn about proper infant feeding practices. Verma et al assessed the attitudes of 2500 urban college women from India along the themes of breastfeeding, bottle feeding, weaning, hot/cold foods, and desire for infant feeding lessons to be included as part of college curriculum (7). The responses were overwhelming in favor for more education covering these concepts during the college years. In another study, after a 5-month nutrition intervention to very poor families of infants in Bangladesh, parents were not only willing to purchase higher quality foods for their

children, yet their infants showed a significantly greater weight increase when compared to a control group (8).

Nutrition educators should be inspired by the receptivity for greater awareness of infant health by women in developing countries. Our duty and privilege is to understand the factors influencing cultural nutrition and to construct educational programs which empower key individuals, such as mothers, with the knowledge and skills to make healthy choices.

References

1. Position of the American Dietetic Association: promotion of breastfeeding. *J Am Diet Assoc.* 1997; 97: 662-668.
2. The World Health Organization's infant-feeding recommendation: <http://www.who.int/nut/> (accessed June 20, 2001).
3. Das DK, Talukder MQ, Sella GE. Infant feeding practices in rural Bangladesh. *Indian J Pediatr.* 1992; 59: 573-577.
4. Food and Agriculture Organizations of the United Nation's nutrition country profiles: <http://www.fao.org/es/ESN/ncp/list.html> (accessed July 1, 2001)
5. Srimathi K, Carruth BR, Skinner J. Cultural influences on infant feeding beliefs of mothers. *J Am Diet Assoc.* 1999; 99: 88-90.
6. Worthington-Roberts BS, Williams SR, eds. *Nutrition Throughout the Life Cycle.* St. Louis, MO: Mosby-Year Book, Inc; 1996.
7. Verma M, Saini V, Singh T. Attitudes of future mothers regarding infant feeding. *Indian Pediatr.* 1995; 32: 429-432.
8. Brown LV, Zeitlan MF, Peterson KE, Chowdhury AMR, Rogers BL, Weld LH, Gershoff SN. Evaluation of the impact of weaning food messages on infant feeding practices and child growth in rural Bangladesh. *Am J Clin Nutr.* 1992; 56: 994-1003.

Barbara L. Hoffman is pursuing a career in international public health. She completed her undergraduate studies in food and nutrition at San Diego State University, and will begin a dietetic internship at Emory University Hospital in Atlanta this Fall. E-mail: hoffman_barbara@hotmail.com Phone: 707-840-0772 ■

Get the Word Out . . .

Help Us Communicate with You, Our Members, Via e-mail! Sending e-mail messages to PHCNPG members is a great way to keep you up-to-date on activities and improve our communications efforts. Keeping your email addresses updated with ADA is the best way to ensure that you will receive the communications!

Updating your member profile information (email, address, telephone) is as simple as:

- Using ADA's Web site to:
 - Update your information via ADA's NEW Member Profile secured server. Using your member ID number and your web password, which was provided to you on your ADA 2001/2002 membership card, you can view your existing member profile, make necessary changes, and submit the change to update ADA's records immediately. <https://secure.eatright.org/CGIBIN/LANSAWEB?PROCFUN+PRWEB01+PR1FN01+PRD+ENG>
 - Print a change of address form from ADA's Web site at <http://www.eatright.org/addresschange.html>, complete the form, fax (312/899-4899) or mail to: American Dietetic Association, Attention: Membership Team, 216 W. Jackson Blvd., Chicago, IL 60606-6995.
- Sending in the Change of Name and/or Address Card found in the back of each Journal.
- Email changes to the ADA Membership Team at membrshp@eatright.org ■



Innovative and Fun Approaches to Nutrition Education for Children

In Tennessee WIC Program clinics, nutritionists provide children a variety of nutrition education activities. Children are enthusiastic learners when taught in innovative and fun ways. The more interactive and creative the teaching method, the more involved and interested the child will be. Children's attention spans are limited but they enjoy learning about foods and nutrition when involved in interactive activities that are appropriate duration and appropriate for their age.

Children enjoy games, singing, puppet shows, art activities, computer games, puzzles, coloring and cooking. All of these activities can be utilized to teach nutrition to children. A recent query of children's books that contain food or nutrition information was completed at a local bookstore. The list contained more than 200 titles! Who could resist picking up a book titled "Runaway Radish" or "Bonzo, the Chocolate Fish"? A nutrition-related book can be read and discussed with a group of children. Some books may have activities that go along with the story. In the Blue's Clues Discovery Series, "Blue Makes Breakfast" book, breakfast foods are discussed and at the end of the book a recipe is provided that children could make. These two simple activities are a great way for children to remember the importance of breakfast. An activity or recipe could easily



be developed and used in conjunction with a story if these activities are not included with the book. Activities can be developed to teach numerous nutrition concepts to children.

In Tennessee, thirteen health departments have nutrition education centers. Each of these centers contains a demonstration kitchen and a mini-mart that is a mock grocery store. These facilities offer nutrition staff a perfect place to work with children. Several of the health departments have the Food Groupie® activity carpet that can be used in many ways to teach young children good nutrition. Health educators in one of the health departments have even taken it and used it in local schools. This same group created a puppet show using the Food Groupie® characters. This has been well received by the children who have viewed the show. One of our nutritionists has scheduled after school story time with accompanying healthful snacks. This activity was advertised in the local newspaper and on radio. Another nutritionist has taught a one-day youth cooking school in the nutrition education center. Many teaching methods were used during the cooking school and included activity sheets, video, 5-A-Day Bingo and a crossword puzzle. The

children toured and went shopping in the mock grocery store in the center. They prepared and tasted a wide variety of foods. The importance of exercise was discussed and they went for a walk after lunch. It was a day the children will long remember. The Tennessee WIC Program is in the process of developing a coloring book featuring the Food Guide Pyramid. This booklet will be available to children in the WIC Program throughout the state of Tennessee. These are just a few examples of the innovative ways nutrition is being taught to children in Tennessee by nutrition staff in our local health departments.

When planning nutrition activities for children, consider their chronological age, attention span, motor skill development and most importantly what that age-child enjoys. Using innovative approaches for providing simple positive nutrition messages to children is very rewarding and enjoyable. Keep the FUN in nutrition education for children.

For information contact Perrie Hutcherson, MPH, RD, LDN, CDE, Nutrition Specialist, Tennessee Department of Health Nutrition Services, Nashville, TN. Tel: (615) 532-8173, E-mail: phutcherson@mail.state.tn.us ■

Take Five: Promoting 5-A-Day for Better Health

Four years ago, Rutgers Cooperative Extension of Union County hired seven nutrition educators including registered dietitians, dietetic technicians and paraprofessionals to improve the nutritional status of food stamp recipients and limited resource youth in Union County, NJ. The *Take Five* program, funded through USDA was initiated in 1999. The purpose of the program is to assist elementary youth with increasing their fruit and vegetable intake. The project funded under the NJ Food Stamp Nutrition Education Program (FSNEP)* includes classroom learning, cafeteria reinforcement of the fruit/vegetable of the month and the experience of gardening.

In 1998, the FSNEP staff collaborated with the Elizabeth School Food Service Director, two teachers and a principal to become

partners in a summer nutrition program in School # 1. Today, the *Take Five* project is reaching 4,000 elementary students grades 2-5 in three hundred and sixty-five classroom sessions in eight



schools per quarter. The FSNEP registered dietitians are preceptors to dietetic interns from

three CADE

(Commission on Accreditation for Dietetics Education) accredited programs in New Jersey. Elementary teachers request a series of ten lessons on fruits and vegetables for a 55-minute period once a week taught by FSNEP staff and dietetic interns. Each lesson includes food tasting, description of the produce item, how it grows, history/geogra-



phy of the item and nutritional content/importance in the diet. The FSNEP staff provide training for the 26 cook managers of the Elizabeth Schools in English and Spanish to support the project. Cook managers are oriented to the *Take Five* classroom lessons along with food safety information and recipes featuring the item of the month. They in turn disseminate the information learned to 230 food service workers in Elizabeth to support *Take Five* in the school cafeterias. The chef for the district prepares 5-10 recipes featuring the fruit/vegetable of the month to motivate food service staff to use new recipes in their own schools to support the project. Monthly lessons feature: Jersey tomatoes, apples, sweet potatoes, cranberries, citrus, kiwi, beans, peppers, strawberries and garden grown lettuce. The Union County Rutgers Cooperative Extension Master Gardeners

(continued on page 10)

TAKE FIVE

(continued from page 9)

assist in training FSNEP paraprofessionals and dietetic interns in gardening. The highlight of the *Take Five* lessons for the school year includes harvesting the lettuce crop for "salad parties" in over 50 classrooms in Schools # 1 and 26. Gardening encourages the Elizabeth youth to consume "Jersey Fresh" produce, to appreciate what they grow, understand where produce comes from, build teamwork through caring for the garden as part of the classroom experience, learn to prepare healthy, tasty snacks, while increasing self-esteem through successful growing and harvesting of produce.

Outcomes of the *Take Five* program include doubling the number of schools/teachers requesting the program. In 1999, pre and posttests were administered in third, fourth and fifth grade classes at the beginning and end of the school year. Results were ana-

lyzed using the SAS-JMP statistical program. Analysis of data indicate youth gained knowledge of the Food Guide Pyramid as taught in lesson 1 and reinforced through all the lessons. One hundred eight third graders defined 1.28 sections at Pretest that increased to 4.8 sections of the Food Guide Pyramid at Posttest. Seventy-four fourth graders knew only 1.29 sections at Pretest but defined 5.0 at Posttest. Thirty-one fifth graders recognized 1.74 sections at Pretest but recognized 3.32 sections at Posttest. When asked 'how many fruits and vegetables they ate yesterday', youth at all three grades indicated an intake of 3.42 at Pretest and 3.5 at Posttest with no significant difference in consumption. Continued reinforcement of the 5-A-Day message is needed in order for students to reach 5 servings of fruits and vegetables daily.

*This program is funded through the NJ Food Stamp Nutrition Education Program (USDA) and the grant is applied for and administered through Rutgers Cooperative Extension, Cook College, Rutgers University as a reimbursement grant project. Rutgers Cooperative Extension of Union County is the local granting agent with match funds from Union County, the State of New Jersey, the City of Elizabeth and several Union County municipalities of \$1 million for the grant year 2002 and \$ 513, 381 requested to support the staff and the program.

For information contact Karen M. Ensle EdD, RD, FADA, CFCS, Project Investigator—NJ Food Stamp Nutrition Education Program-Union County Project, Rutgers Cooperative Extension of Union County, 300 North Avenue East, Westfield, NJ 07090. E-mail: ensle@aesop.rutgers.edu

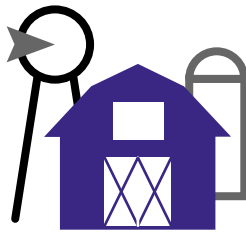
Linking Nutrition Education with Farms

How familiar are you, your clients or their families with local agriculture and how it impacts their everyday lives? That's the question more and more people are asking these days, based on the growing popularity of a national initiative called Community Supported Agriculture (CSA).

CSA is based on the principle that the future success of our farms is dependent upon the relationships between farmers and an expanding non-agricultural population. And, in many ways, the future success of our communities can be cultivated by strengthening our connection with our agricultural roots.

CSA can help "re-connect" local consumers with local farmers -- and the farm; promote a sense of family and community; honor the knowledge and experience of local growers and producers; and teach consumers how to improve diet quality by increasing consumption of locally grown agricultural products.

Building on this concept of community, Rutgers Cooperative Extension (RCE) of Gloucester County, NJ, launched a new nutrition and farm education initiative called *From Our Farms* in August 2000. It's a fun program to help children and their families learn about the importance of good nutrition, as well as the value of local agriculture and the role it plays in enriching our communities and the environment.



Helping people understand where their food comes from is one way to help them explore food options and incorporate more fresh foods into their diets.

Through *From Our Farms*, children learn about food, nutrition and the farm with *From Our Farms* learning boxes, available through local libraries. Learning boxes are themed learning kits aimed at children and their parents. The boxes include instructional materials that serve a variety of learning styles, including games, puppets, audio and/or videotapes, puzzles and farm- and food-focused storybooks. Boxes also include family learning units (i.e., workbooks), developed by Rutgers Cooperative Extension. Family learning units contain a series of lessons and activities for parents and children to work on at home, in conjunction with the storybooks and other materials in the boxes.

Parents and children check out the boxes for use at home, where they read stories and play games that teach about food, nutrition and agriculture. Then, they complete a series of lessons and hands-on activities outlined in the family learning units. For example, they grow vegetables; visit local farms, farm stands and grocery stores; taste and compare different varieties of peaches or

tomatoes; pick and eat berries; and prepare basic meals and snacks. The learning boxes serve as a resource that provides the necessary tools for families to learn together about local food, nutrition and agriculture.

Countywide Support and Consumer Appeal

In an era where consumers are becoming farther and farther removed from the basics of where their food comes from, *From Our Farms'* agrarian and back-to-nature appeal has attracted the interest of parents, kids, community groups, civic organizations, farmers and government officials, alike. Since the program's inception in August, these groups have readily contributed their time and expertise -- as well as the funds to support the program -- to make *From Our Farms* a thriving and successful program for Gloucester County, NJ families. (In one year, the program has reached more than 2,500 children.) As a result, Gloucester County residents are learning about New Jersey agriculture and "Jersey Fresh" farm products -- fruits, vegetables and dairy products. And, they're coming out to farms to try new foods and purchase locally grown products.

For information contact Luanne Hughes, Rutgers Cooperative Extension, 1200 N. Delsea Dr., Clayton, NJ 08312. E-mail: hughes@aesop.rutgers.edu



Soyfood Nutrition Education

Eating Healthy - The Benefits of Soyfoods

Since 1998, the Family & Consumer Sciences Educator with Rutgers Cooperative Extension

has responded to consumers' needs through a variety of program delivery methods, including 10 workshops, 10 staffed teaching exhibits, 9 small group presentations, and 6 taste-testing demonstrations. The goal of the workshop: Eating Healthy - The Benefits of Soyfoods is to provide research-based information on the nutritional benefits of soyfoods, how to purchase and prepare soyfoods, and how to incorporate soyfoods into one's diet on a regular basis. The program is located in Burlington and Camden Counties, New Jersey.

Workshop: Eating Healthy - The Benefits of Soyfoods

The soyfoods workshop (2 1/2 hours) featured an in-depth lecture by the Family & Consumer Sciences Educator on the health benefits of soyfoods. It included transparencies created by the FCS Educator and a demonstration of the "what, how, and where" to purchase and prepare a variety of soyfoods - starting with the green vegetable soybean and progressing to second-generation soyfood products.

A soyfood buffet table is featured with each workshop, including entrées, side dishes, and desserts prepared with tofu, tempeh, soy flour, textured soy protein, and other meat/cheese soy alternatives; food samples of edamame (green vegetable soybeans),

soynuts, soynut butter, soy beverages, and miso. Participants tasted each soyfood as it was being discussed during the demonstration.

A packet of literature, a soyfoods cookbook, and soyfood samples were given to each participant.

Workshop Impacts & Outcomes:

Participants completed two evaluations: an after class and a follow-up evaluation mailed approximately six weeks later. A long term survey was conducted in January 2001.

After-class evaluations:

- 91% (370 out of 393) rated the workshop as "valuable to very valuable"
- 90% gained knowledge about the nutritional benefits of eating soybeans/soyfoods
- 94% gained knowledge on how to purchase and prepare soyfoods
- 84% planned to purchase soyfoods
- 77% planned to prepare soyfood dishes at home
- 85% planned to include soyfoods in their diets on a regular basis

Follow-up evaluations:

- (171 responded out of 370 evaluations mailed 6 to 8 weeks later, resulting in 47% response.)
- 94% purchased soyfoods
 - 77% prepared soyfood dishes at home
 - 82% included soyfoods in their diets on a regular basis (daily or weekly).

Long-term surveys:

(111 responded out of 220 surveys mailed

to participants of the first 8 workshops, resulting in a 50% response.)

- 97% rate the information presented in the workshop as "valuable to very valuable"
- 93% continue to purchase soyfoods
- 66% continue to prepare soyfood dishes at home
- 80% continue to include soyfoods in their diets daily or weekly
- *A few selected comments from the long-term surveys:*
Overall, the comments indicated that participants used the information from the workshop to make positive behavior changes .
• "I had read about the benefits of soy, but until your workshop, had no real ideas on how to add it to my diet. Seeing the food choices and hearing about possible ways to use it was really helpful"
-April 30, 1998
• "I enjoyed tasting and learning about the possibilities for using soyfood. I incorporated it into my diet in easy ways that I like."
-October 26, 1999
• "As a result of tasting soy products, we are now using things we never used before. "Edamame is a favorite!"
-October 27, 1999

For information contact Rita T. Wood, FCS Educator, Rutgers Cooperative Extension, P.O. Box 6000, Mount Holly, NJ 08060. Tel: (609) 265-5051, Fax: (609) 265-5613, E-mail: wood@aesop.rutgers.edu ■



From the Bookshelf

Secrets Of Feeding A Healthy Family, Eilyn Satter, RD

A how-to book that inspires you to love and cook your favorite food. This book helps the timid or time crunched past the barriers to getting a meal on the table. This resource takes a look at "problem eating" and encourages you to provide yourself with food joyfully and positively. Recipes include information such as "fast tips," how to include children in the kitchen and why it is okay to eat bacon.

Healthy Foods For Healthy Kids, Bridget Swinney, R.D.

A resource to help parents encourage their children to form healthy eating habits. Offers specific methods to make mealtimes pleasant. Topics covered include smart shopping, food safety, feeding infants and

toddlers and creating fun and nutritious snacks and meals. Recipes are provided.

Fit Kids, Eileen Behan, RD

A useful guide for tackling the tricky issue of childhood obesity. Provides sensible step-by-step diet and activity plan so kids can lose weight safely, boost self-esteem and strengthen family ties. Includes nutritious and healthy recipes for families on the go.

365 Foods Kids Love To Eat, Sheila Ellison & Judith Gray

A delightful recipe book of foods that make eating fun for kids. Recipes focus on increasing fruit, vegetable and grain consumption in kids. From P.B. and Pineapple Sandwiches to No-Bake Nutty Fruit Drops to the crepe club sandwiches, food that's fun for kids and adults alike!

Healthy Snacks For Kids, Revised Edition, Penny Warner

From the busy caregiver to the frazzled parent with hungry kids, this resource provides over 120 recipes. The revised edition has incorporated the Food Guide Pyramid, strategies for snacking, easy-to-make dishes and whimsical names into inventive snacks, drinks, breakfast, lunches and dinners.

Seeds Of Change, Learning From The Garden Judy Mannes and Marsha Rehns

This unique book helps kids learn the origins of the food we eat: the doughnut you eat for breakfast in Cincinnati becomes the bowl of rice in Beijing and a tortilla in Mexico City. Learn the hands-on of gardening and the social aspect of eating with the 40 activities included. ■

**Public Health/
Community Nutrition Practice Group
'01-'02 Executive Committee**

- Chair**
Carolyn Gleason, MS, RD
Seattle, WA; 206/615-2486
- Past Chair**
Doris Fredericks, MEd, RD, FADA
Santa Clara, CA; 408/374-2232
- Chair-Elect**
Betsy Haughton, EdD, RD
Knoxville, TN; 865/974-6267
- Secretary/Treasurer**
Phyllis Allen, MS, RD, MPH
Columbia, SC; 803/898-0802
- Alliance Coordinator**
Elvira Jarka, MPH, MS, RD
Overland Park, KS; 816/426-5291 ext. 255
- Newsletter Editors**
Christina Ferroli, PhD, RD
Indianapolis, IN; 317/848-7351
- Josefine Wendel, MS, RD**
Cambridge, MA; 617/661-1599
- Awards Committee Chair**
Doris Fredericks, MEd, RD, FADA
Santa Clara, CA; 408/374-2232
- Network Coordinator**
Sherry Clark, MPH, RD, LD
Kyle, TX; 512/458-7785
- Quality Management Chair**
Janice Steffen, RD, LD
Cumberland, IA; 515/281-7095
- Nominating Committee Chair**
Sally Swartz
Castle Rock, CO, 303/846-6273
- Membership Committee Chair**
Rebecca Lindberg, RD, LD
Edina, MN; 952/967-6717
- Legislative Coordinator**
Penny Roth, MS, RD, LD
Springfield, IL; 217/524-3353
- Nutrition Services Payment System
Coordinator**
Barbara Krueger, MNS, RD, CDN
Delmar, NY; 518/402-7168
- Advisor**
Alice Lenihan, MPH, RD, LDN
Raleigh, NC; 919/715-0636
- Public Relations Chair - Vacant**
- PIR Delegate**
Katrina Holt, MPH, MS, RD
Arlington, VA; 703/524-7802
- ADA Staff Liaison**
Kim Pedroza, RD
Chicago, IL; 800/877-1600 ext. 4725



**Training and Continuing
Professional Education Opportunities**

2001 FNCE - St, Louis Missouri

WORKSHOP GUIDE

You may register on-site for workshops, but prior registration is recommended to avoid the session being filled. The session is approved for 4 CPE hours (CPE level - III).
Saturday, October 20, 1-5 pm - America's Center.

Mother's Milk: Breastfeeding in the New Millennium

Speaker: Molly M. Pessl

Objectives include:

- Document recent research on oxytocin and newborn biology
- Describe the intricacies of human milk production including milk storage capacity of the breast and variations in milk secretion
- List three advantages of skin-to-skin care for all newborns
- Evaluate hospital postpartum routines that may sabotage breast feeding

- Identify common parenting myths and community resources that can help families succeed

This session, including video and role playing, will meet four of 30 hours that are needed by those seeking the International Board of Lactation Consultants credential (IBLCE). Dietitians and health professionals will gain knowledge and confidence to provide quality counseling to prenatal and lactating clients.

\$85.00 ADA members/\$115.00 non-members
Register at fnce@ttgonline.com or 1-800-234-1446

For more information please contact Tracy Petrillo, MS, RD, Director, Professional Development
American Dietetic Association
phone: 800-877-1600 ext. 4837
fax: 312-899-0008
tpetrillo@eatright.org ■

Newsletter Deadlines and Submission Guidelines

Share your expertise and success!
Let other PHCNPG members know what you are doing, how well it works, and how it is done. Consider writing an article or a short description of a program, community or school-based intervention, or curriculum that you are involved in. It's a great way to showcase your successful and innovative programs, as well as provide inspiration and guidance to other members. You can submit your contribution by e-mail or 3-1/2 inch computer diskette to Jamie Stang, Newsletter Editor, by the deadlines listed below.

Topic	Edition	Deadline
Promoting Behavior Change	Winter 2001	October 1, 2001
To Be Announced	Spring 2002	December 1, 2001

Please include the following information with your submission: Written permission to print the article in the newsletter that is signed by all authors; names, credentials, affiliations and preferred addresses for all authors; copyright permission for any materials that have been previously published or are the work of a person who is not listed as an author; references written according to JADA guidelines (see the January issue of JADA for author guidelines); and the name, telephone number, fax number, and e-mail address for the corresponding author.



Public Health/Community Nutrition Practice Group
Christina Ferroli, PhD, RD
9245 N. Meridian Street, Suite 118
Indianapolis, IN 46260-1874

First Class Auto
U.S. Postage
PAID
Palatine, IL P&DC
Permit No. 7