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WIC

news

Volume 19, Number 2



Postpartum Period:
A New Focus

Meeting the Challenge with a New Focus

WIC

is in a unique position to make a difference in women's nutritional status during the postpartum period. This edition of the Texas WIC News has several articles that discuss ways to assist women during that critical time after delivery. Our goal is to provide good nutritional and health information to help a postpartum woman achieve optimal health status for herself now and for any subsequent pregnancies.

There are several articles included in this issue that address your role in supporting the mother as she works to get back in shape. Christina Garcia's article on page 6, titled WIC Helping Moms Regain their Stride, is an excellent guide for any counselor working with postpartum women.

We currently serve over 65,000 postpartum women, some of which may be dealing with postpartum obesity. The article on page 4, titled Good Health Practices Help Overcome Postpartum Obesity, offers several counseling considerations.

Utilizing VENA techniques should also help you identify those women who may be experiencing postpartum blues or even more serious depression. The article on page 8, WIC Helps Moms Ward off the Blues, discusses tips you can share with moms for staying healthy and happy.

We are really delighted with the new fitness DVD and lesson developed by our staff for new moms called Get Your Groove on Mama! I recommend you take time to view it.

We are proud that our breastfeeding rates are going up and we want to continue to see those numbers rise. You are doing a great job with this and we hope to see even greater improvement with the recent focus and emphasis on the peer counselor program.

Once again, thank you for all of your hard work. We recognize the difficulties you face with the numbers that you are serving and we are working to develop solutions to many of those problems. Keep your eye out for updates in future Texas WIC News issues.



From the Texas WIC Director

— Mike Montgomery



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Good Health Practices Help Overcome Postpartum Obesity



by Tonia Swartz, R.D., L.D.
Clinical Nutrition Specialist



Being overweight or obese prior to becoming pregnant or gaining too much weight during pregnancy can have negative consequences to a mother's health in the postpartum phase and beyond. WIC staff can help at risk women get in shape and achieve optimal health for subsequent pregnancies.

Obesity (BMI \geq 30) has been found as a risk factor in postpartum women for the following reasons:

- **Postpartum Depression (PPD)** – Some studies suggest obese women and women who gain too much weight during pregnancy are at increased risk for developing PPD. Depressive symptoms may promote weight gain, weight retention and weight regain. Further, it may be a barrier to weight loss.
- **Weight** – Obese or overweight women have more difficulty losing weight postpartum and are more likely to retain pregnancy weight gains than women who are not obese or overweight. Risk factors for weight retention postpartum include high gestational weight gain, being overweight or obese pre-pregnancy, inadequate sleep, inactivity and frequent television watching.
- **Postpartum Hemorrhage (PPH)** – PPH is when there is significant blood loss after delivery. PPH is the leading cause of maternal death (about 8% of the maternal deaths). Some studies suggest that obesity may be a risk factor in PPH.
- **Iron Deficiency Anemia** – Low income, obese women are at increased risk for iron-deficiency anemia. Low hemoglobin levels have also been linked to PPD.
- **Breastfeeding Complications** – Overweight or obese women may be less likely to initiate breastfeeding or maintain breastfeeding when compared to women of BMI \leq 30. Reasons are multi-factorial and can include existing medical conditions or be cultural or psychological. These women may have lower

self-esteem, poor body image and poor mental health.

Postpartum Counseling Considerations

The goal for overweight or obese postpartum women is to strive towards good health practices, which include a healthy diet, being active and maintaining a healthy weight. Ideally, good health practices should start before becoming pregnant; however, it is never too late to be healthy.

Diet – Participants should be eating a healthy diet that includes a variety of fruits and vegetables and high fiber foods. Eating foods from all the major food groups should be encouraged to ensure appropriate nutrient intake.

Remind moms that a proper diet is needed to support exercise activities. Be sure your participants are consuming enough calcium, iron and fluids. Weight loss diets should never be initiated during pregnancy. Fad diets and skipping meals should be discouraged. Encourage healthy eating habits for the entire family. It is difficult to change poor dietary habits if you are the only one in the house trying to make a change.

Sleep – We all know how hard it is for new moms to get sleep. Sleep is an important component to postpartum health and a lack of it is a contributing factor to PPD. Ask mom about her sleep patterns. Some studies have shown that moms who receive less than five hours of sleep per day are more likely to retain weight gained during pregnancy. Often, being overweight or obese can interfere with achieving proper sleep either in duration and/or quality of sleep.

Exercise – All postpartum women should get their primary care physician's approval before starting any exercise program. Encourage activities such as tennis, playing with the kids at the park, bike riding with the family or even dancing. Avoid the word "exercise" as this may turn people off right away. Instead, use a more friendly word like "activity." Let Mom tell you what she likes to do for fun. Keep in mind, each mom is different in medi-

cal history, level of fitness and postpartum recovery. Optimal goals include 30 minutes per day of moderate exercise intensity, five days per week. Fitness levels vary; so, some moms may need to start small. You can suggest starting with 10 minutes of activity 1 or 2 days a week and build from there.

Weight loss – Each person is an individual and when it comes to weight loss, what works for one mom may not work for another. Goals for weight loss need to be individualized and gradual weight loss should be encouraged. Weight loss is more likely to be maintained if only 1 to 3 pounds per week are lost. Women should be reminded there is no quick way to lose weight. Rapid weight loss can negatively affect health. Mom should be encouraged to exercise if she is breastfeeding. If mom is eating appropriately to support exercise activities, her milk supply should not be affected.

Being at a healthy weight should be encouraged before becoming pregnant; however, new WIC participants do not come into the clinic until they are already pregnant. Use your professional judgment and VENA techniques when counseling. Keep in mind that mom may not be ready to make a change yet. Just let her know you hear her. Make referrals as necessary and be familiar with the latest educational materials, lessons, and videos that WIC has to offer.

References:

<http://www.cdc.gov>
<http://www.nih.gov>
<http://www.reuters.com>
<http://pediatrics.aappublications.org/>





WIC helping moms regain their stride

by Cristina García, R.D., L.D.
Breastfeeding Promotion Nutritionist

There's nothing like bringing home a new baby. There are so many things to cherish, learn, and experience. Nine months of waiting, hoping, planning, and wondering have finally come to an end, and now — the grand finale — the baby's arrival. Having the baby marks the end of the pregnancy, but it also brings with it a new focus.

One thing moms may think about during pregnancy and after delivery is starting up a workout routine to regain their pre-pregnancy body or improve their body shape or weight. Although this may be something they're considering, often it gets pushed to the bottom of their priority list because of the many new duties required of them as a new mom. Here are some things WIC can do to help these moms find a balance in their new, often hectic, daily routines.

Start by offering encouragement – There is nothing nicer than receiving an encouraging compliment, especially when you are a new mom. Moms may find that things that were once simple now consist of intricate and time-consuming details for their babies. Highlighting

the things that Mom is accomplishing already will help her feel like she can be successful at other goals as well, versus her feeling overwhelmed with all of the things she has yet to achieve.

Take the pressure off – Moms often put a lot of pressure on themselves, including pressure to bounce back quickly after having the baby. Let them know that the best way to lose the baby weight (and keep it off) is to work at it slowly. It is important to remind them that eating healthy meals and snacks will have a direct effect on their energy level. Inform breastfeeding moms that they are burning about 600 calories a day by breastfeeding.

Remind moms to think of themselves – One of the best ways new moms can care for their babies is by taking care of themselves. However, new moms often turn their focus to their new babies. Eating healthy foods, drinking plenty of water, getting fresh air, and taking naps are some ways moms can rejuvenate themselves so they can feel their best while caring for their new infants.

If you offer suggestions, keep them simple and quick – There are a lot of changes and things to learn for families with new babies.

For example, if a mom has been cleared for exercise by her health care professional but does not know how to begin, suggest easing into a fitness routine by strolling her baby around her neighborhood or taking a walk during lunch or break time, if Mom has returned to work.

A major, tedious exercise program will be less likely to become a part of a regular routine. If she feels that the suggestion is “do-able,” the foundation for success is set.

Do research on local activities – Keeping up with local activities can provide new moms with great resources such as Mom and Baby exercise classes or walking stroller groups. These types of resources help a new mom in many ways, including encouraging her to stick to her fitness commitment.

Encourage small changes and attempts to achieve goal – As with all big changes, there will be some days that moms may be able to do more than on other days. For example, a mom interested in daily neighborhood walks with the stroller may begin with a few days of only getting the baby ready or figuring out all of

the proper safety features of her stroller. Consider those attempts as steps towards her overall goal, even if she never makes it out the front door. Encourage new moms by acknowledging their successes, even if it means praising attempts to achieve their goals.

Slowly but surely, moms will figure out what works the best for their families and their daily routines. Helping them navigate through obstacles or find resources to accomplish their goal can pose a challenge. Here’s an easy way for you to remember how you can help them take it all in stride:

Start by offering encouragement

Take the pressure off

Remind moms to think of themselves

If you offer suggestions, keep them simple and quick

Do research on local activities

Encourage small changes and attempts to achieve goals

Resources:

<http://www.webmd.com>

<http://www.women.webmd.com>

<http://www.fitpregnancy.com>



Get Your Groove On Mama! is a great new fitness DVD and lesson combo by Texas WIC for postpartum moms. The DVD and lesson emphasize the importance of physical activity as a way for moms to take care of themselves and their families. We know new moms are short on time so the DVD includes 10-, 20- and 30-minute options. The 20- and 30-minute extended options include toning exercises that Mom can do with her baby. There is also a separate yoga segment to help moms relax. Check out this excellent new WIC resource today!

WIC Helps Moms Ward off the Blues

by Jessica Coll, R.D.
Nutrition Education Consultant

Being a mom is a rewarding but tough job. Many WIC clients are stretched thin, juggling the responsibilities of family and work while trying to find time to take care of themselves.

Through VENA counseling, group classes and other nutrition education avenues, WIC staff have the opportunity to provide support and encouragement. This in turn will help moms cope with the stress of daily life and develop healthy habits to help ward off the blues.



With this in mind, I'd like to share a personal story which was eye-opening for me. While working at a WIC clinic, I had the opportunity to lead a walking group. One particular mom, Lea, was the most positive and motivated walker of the group, welcoming the new families and chatting with them to make them feel comfortable. After a few months of perfect attendance, Lea shared with us that before joining the walking group she suffered from serious depression. She said that it was the WIC walking group that helped her out of it.

On the outside, Lea never looked depressed. She was cheerful right from the beginning, but you can never judge a book by its cover.

About one out of eight women experience

some form of postpartum depression after delivering a baby. Many of these moms are left undiagnosed and thus untreated. Just like Lea, participants may look fine but are keeping a lot of negative feelings inside and never reach out for help.

At the WIC clinic, staff can make a world of difference for these moms. Sometimes all it takes is a simple question: "How are you doing today?" Other times, it may take more time for them to open up. Whatever the case may be, it's best for staff to set up a positive environment and try to make the client feel as comfortable as possible. A genuine smile and welcoming environment is the first step. Your positive attitude and personal attention to clients as individuals may positively impact hundreds of families each year.

When counseling a mom, greet her by name. (Be careful about using first names. Sometimes people don't like that.) To ensure privacy, keep your voice low, close the door or move to a private location. Remember to be patient and understand that she may not be ready to open up during this session. Your responsibility is to provide her with a welcoming environment. It is up to her whether she chooses to share.

Throughout the session, focus on the client and the client only. Try not to do other things while talking with her. When she talks, just listen. When you talk, give her your full attention. All moms deserve your best.

Lea is just one example of a client who waited for months to share her story. Moms may hide their feelings for a long time. Here are some general tips to help moms stay healthy and happy:

- ☑ **Stay active** – When a mom is physically active, endorphins are released and make her "feel good." Lack of time is often a reason given for not being active. However, you can work with a mom to discuss the benefits of exercise and help her identify

small realistic ways to fit it in. Usually if she includes her children in her exercise regime (for example: silly dancing with kids) her success rate is higher.

- ☑ **Get enough sleep** – Eight hours of sleep per night is recommended for adults. After a good night's sleep, mom will definitely feel better and have more energy to deal with day-to-day activities and perhaps make more time for herself. However, eight hours of sleep is not always realistic, especially with infants and children. If mom is feeling run down, you can discuss the importance of getting enough sleep. If she has children that nap, suggest she sleep while they sleep. To avoid distractions, she could take the phone off the hook. Constructing a sleeping routine with mom has been proven to be very helpful.
- ☑ **Avoid isolation** – At WIC, moms can connect with each other by sharing similar stories through group classes and other nutrition education programs. Being with other moms is much more motivating than being alone. The walking group I led at the WIC clinic provides a great opportunity for mothers to get to know one another.
- ☑ **Eat healthy** – WIC food packages provide a variety of nutritious foods to support optimal health. During a session with Mom, you can talk about a typical day's food intake and increase awareness about eating enough but not too much. It's also important that moms avoid fad diets. Any diet that seems "too good to be true" probably is.
- ☑ **Hydrate** – Not drinking enough water could lead to a decrease in energy and performance. Recommend the mom drink when thirsty throughout the day and carry a water bottle with her.
- ☑ **Manage stress** – Encourage Mom to identify her sources of stress. Help her find solutions to manage them, or at least some of them.

- ☑ **Do something enjoyable** – Give Mom time during your counseling to identify one thing that she enjoys doing for herself. This could be something simple like walking through a garden, for example. Encourage her to set a specific time during the day for that purpose.

Whenever you feel like Mom needs more assistance, refer her to local resources (<http://www.postpartum.net> is a great website to search for local support). WIC is often the first step in the process.

The WIC walking group kept Lea physically active and connected with other moms. Little did I know that this had an impact in helping her feel better.

Most of a mom's time is usually devoted to her children so she may not take time to think about herself. Or maybe there is too much going on at home and no one is there to listen. Some moms will open up after a quick greeting and some will need more time. Whatever the case, our role at WIC is to support the families in any way we can. Whether you realize it or not, you do make a difference!



Why **WHOLE GRAINS** Are Not Included in Non-Breastfeeding Postpartum Food Packages

by Lisa Rankine, R.D.
Clinic Services Program Coordinator



Food Package Changes - October 1, 2009
The U.S. Department of Agriculture commissioned the Institute of Medicine (IOM) to review the WIC Food Packages. As a result, the IOM came up with ways to change the food packages and established which supplemental foods would be offered to each category of WIC participants. The recommended changes in the food packages were based on changes in demographics of the WIC population, in the food supply, in dietary patterns, in health risks and in the dietary guidelines and recommendations. A first step in revising the food packages was to identify the nutrients and foods of highest priority based on estimated intakes of WIC subgroups, published evidence of inadequacy or excess and recommendations from the Dietary Guidelines for Americans 2005.

It was noted that nutrients found in whole grains including zinc, thiamin, riboflavin, niacin, B6 and folate were found to be more inadequate for pregnant and lactating women than for postpartum women.

Why no whole grains for the non-breastfeeding postpartum women?

The IOM states, "The nutritional needs of pregnant and breastfeeding women ordinarily are higher than those for non-breastfeeding postpartum women..." That influenced the decision not to include whole grain options in the food package for postpartum women.

The new WIC food package for postpartum women still provides food sources for nutrients most often found to be inadequate including iron, magnesium (cereal and beans) vitamin A (eggs), vitamin E (peanut butter, fruits & vegetables) and Vitamin C (juice).

More For Breastfeeding Moms

The goal of the design of the revised food packages is to strengthen WIC's breastfeeding promotion efforts and provide additional incentives for mothers to initiate and continue breastfeeding. The idea was to make the exclusive breastfeeding food package more attractive than the formula-fed food package.

The differences in the new food packages for the mother-infant pairs are based on differences in nutritional needs. Breastfeeding women require extra calories and nutrients; therefore, the fully breastfeeding women food package provides the most food energy and nutrients whereas the postpartum food package provides the least.

The goal is for all participants to benefit from the new food packages. We believe that the incentive value of the breastfeeding package may encourage a higher level of breastfeeding among mothers who both breastfeed and formula feed.

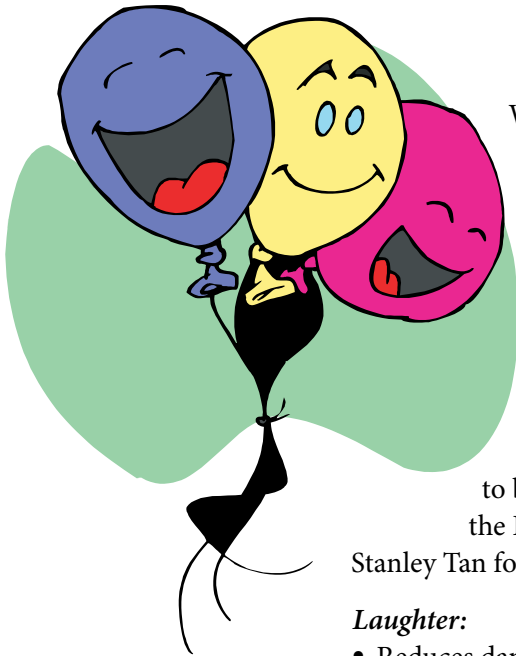
WIC staff should encourage participants to take advantage of the WIC Program benefits available to them by providing the food package they can qualify for, nutrition education, high risk education and referrals. If they choose not to breastfeed, be prepared to explain why they do not receive some of the WIC foods made available in the breastfeeding packages. The food packages were designed to meet the nutritional needs of each category.

Resource:

http://books.nap.edu/openbook.php?record_id=11280&page=R1

WIC Wellness Works

Stress is no laughing matter. But wait, is it?



We don't need to hear the statistics to know how stressful daily life can be. Stress occurs at home and at work — to be alive is to be stressed! Even though not all stress is bad (e.g., having a baby or buying a house), it can add up over time and take a toll on our mind and body. In these difficult economic times, we need to take particular care to reduce stress at home and at work by utilizing good coping skills.

One tool that is often overlooked and undervalued is humor. Yes, a good laugh does have value. In fact, humor is clinically proven to be effective in combating stress. According to controlled studies at the Loma Linda University School of Medicine, Dr. Lee Berk and Dr. Stanley Tan found that the experience of laughter has many health benefits.

Laughter:

- Reduces damaging stress hormones which weaken the immune system and elevates blood pressure,
- Enhances healthy hormones that can reduce fatigue and support a positive mood and,
- Increases the number of antibody-producing cells, which help prevent and combat illness.

The old saying is true. Laughter is the best medicine. But why is it so effective? Humor is about perception, distraction, and physical release. Studies on perception show that when we take a light-hearted look at a difficult situation, it reduces the perceived threat of that situation. Stepping back allows us to look at the big picture with a realistic view of what is happening and how it fits into the big picture. Bill Cosby frequently says, "If you can laugh at it, you can survive it."

Laughter also provides a temporary diversion from the situation and interrupts the cycle of worry and anxiety that result in stress. For that single moment of laughter, you release the build-up of the physical and emotional affects of stress, which enables you to begin effective problem solving.

Finally, belly laughs relieve muscular tension, improve breathing, and help regulate the heart beat. It also feels good to your tummy.

(continued on WIC Wellness Works - 2)



Humor at Work?

What better place to start increasing your laughter quotient than with co-workers? Work with fellow employees at your clinic to find ways to lighten up the atmosphere. Here are some ideas to consider:

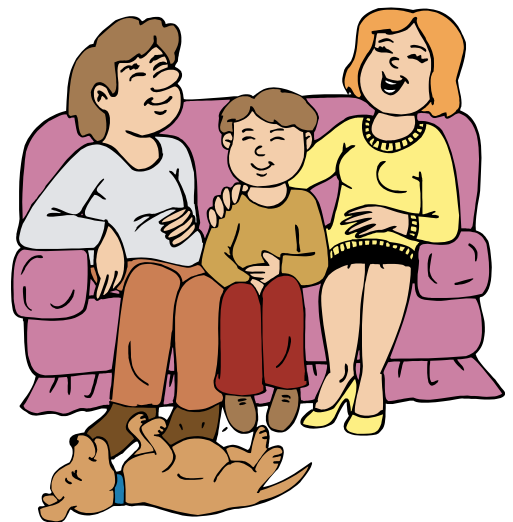
- **Comic strips:** Place appropriate comic strips on the back of the bathroom stall doors. Why not combine personal time with smiling?
- **Joke of the Day:** Post lighthearted, non-offensive jokes in the employee common room. For help, check out this website for ideas: <http://www.ajokeaday.com/>. Someone at your work may be a closet comic.
- **Comedy Week:** Designate one week every quarter and show hilarious sitcoms in the break room. Classic favorites that are not offensive include I Love Lucy, Leave it to Beaver, The Andy Griffith Show, Fawlty Towers, The Bob Newhart Show and other timeless shows.
- **Belly laughs:** Start and/or end your next staff meeting with fake laughter that will evolve into a genuine group roaring fest. You will be amazed with how much fun this is.
- **Staring Contest:** Guaranteed to make you smile, but just don't blink!

Humor at Home?

Consider these options:

- **Movie night:** Check out the top 100 funny movies of all time from the American Film Institute. Watch them with your best friends, family or alone.
<http://www.afi.com/tvevents/100years/laughs.aspx>
- **Joke books:** It may sound corny, but purchase some joke, riddle, or favorite comic books to keep around the house for a good laugh. Carry funny books in the car for kids to read out loud as you travel.
- **Electronic Jokes:** Sign up to receive a joke a day through your email. It may be the best laugh you get that day! Search the web for many options that fit your taste.
- **Norman Cousins:** For inspiration and a good laugh, read Norman Cousins' two books, *Anatomy of an Illness* and *Head First: the Biology of Hope*.
- **Funny collection:** Collect buttons with funny sayings on them or funny bumper stickers.

With just a little effort, you can reduce the stress in your day by adding humor. And here is THE BEST NEWS OF ALL — laughter is free and contagious so “Pass it on.”





Smart Choices, Healthy Staff Salad Contest for Project 12

The Hidalgo County WIC Program, Project 12, held a *Smart Choices Healthy Staff Salad-Off* contest. Participants were randomly assigned a salad found in the Let's Cook with Fruits & Vegetables book. Judging was based on a scale of 1 to 10 for taste, presentation, and uniqueness. Contestants were encouraged to use their creativity to distinguish their salads from all the others (add other ingredients, creative cuts, etc.). The winning recipe was Tangy Sunshine Salad (page 45 in Let's Cook with Fruits & Vegetables book). Congratulations to the winning chefs at LA 12-06 in Donna, Texas.



recipe

1st Place – Tangy Sunshine Salad

Original Recipe

3 cups seedless watermelon, cubed or balled
2 cups seedless green grapes
½ cup red bell pepper, diced
¼ cup parsley, chopped
1 large yellow tomato, diced
1 large red tomato, diced
1 tablespoon balsamic vinegar
Salt and pepper to taste

Procedure:

In a large bowl, combine all ingredients.
Toss with balsamic vinegar

Add more vinegar, salt and pepper to taste. Serve chilled.
(serves 4)

Modifications:

- Omitted the red bell pepper due to contestant's allergy.
- Used two large red tomatoes instead of one each of yellow and red tomato (could not find it at local grocery store).
- Substituted one cup diced pineapple for bell pepper (to keep yellow in recipe) and ¼ cup flat-leaf parsley for regular parsley.
- Added chili pepper powder, lime and cucumber
- Rubbed lime to rim of glass, applied chili pepper powder and garnished with cucumber.



Beating Breast Cancer: Arcadia Martinez's Story

Arcadia Martinez was diagnosed with breast cancer in July 2008. Now in remission, she credits her healing to the support of her co-workers at the University WIC clinic in Houston, her doctors, and the overall positive health changes she has made since her diagnosis. Fortunately, Arcadia's cancer was diagnosed at stage one, the most treatable phase of the illness. Although Arcadia doesn't mention it, her fighting spirit was likely the main source of her successfully beating the disease.

In addition to Arcadia's determination to continue living her life as normally as possible, she made many positive changes to her health. "In the beginning," Cinthya Mohamed, the WIC Wellness Works coordinator for Arcadia's clinic said, "Arcadia wasn't really interested in being part of the WIC Wellness Works program that we were doing here at our clinic. She always had that attitude, 'Aw, I'm okay – I don't really need it.' She used to live in an apartment on the third floor and she'd say, 'Well that's enough exercise for me' and we'd all laugh. But after her diagnosis, she cut down on her coffee and soda and she began walking with us. We were all pretty big soda drinkers, but seeing her say 'No, I want none of that stuff' made us cut down too."

Arcadia said she began exercising at the advice of her doctor. "He said I was going to have to do some kind of physical activity – at least 30 minutes a day. I was like, 'Okay, I have to follow orders.' But after I started exercising, I just started feeling better about everything, and having more energy."

Walking with her team became a powerful way to cope with the effects of her illness and the treatment. "We walk, sweat, and talk at the same

time – so it's been good stress management for all of us," Cinthya shared.

The clinic also participated together in WIC Wellness Works "Take a Hike on the Texas Trails." "We try to work as a team to get our walking in," Arcadia explained. That team spirit is key to what helped Arcadia keep her own spirits up during her illness and recovery.

When reflecting back on her healing process Arcadia shared, "I struggled a lot. I was really sick, but being at work actually made me feel better. They [my colleagues] care about me so much. I've been really fortunate, because all the people I work with give me so much support." So much support in fact, that Arcadia didn't want to let them down by taking any time off, not even on her most difficult days.

"She gave us all a sense of wow," Cinthya said. "We were all very proud of her. At any moment, we were expecting her to take her time off and recoup, take a vacation – we're still waiting for her to take a vacation! Just seeing her come in every day... she always expressed not wanting to be gone and make our workload harder. We were amazed that she was thinking of us. Not many people would do that. She helped us and we helped her along the way."

On the day Arcadia was interviewed for this story, she shared a bit of exciting news. To the delight of her colleagues, she was heading to Florida that evening and finally taking that much deserved vacation.

Note: Arcadia, as of the publication of this story, is still in remission and doing well.

Darrell Grimm Receives Customer Service Award

by Renee Mims

Information Technology specialist Darrell Grimm was asked to go to the Texas Association of Local Agency — Women, Infants and Children Directors (TALWD) conference in October to “help” Linda Brumble with her presentation. What the data base administrator did not know was that he was being recognized that night with a customer service award by TALWD.

“I was asked to go to San Antonio to help answer questions for a presentation that I thought was going to happen,” he said. “So, yes it (the award) was a surprise!”

He credits his working relationships with the directors over the years for helping him provide consistently good customer service.

“I try to do what I can with what I know,” Grimm said. “I have to thank the local agency staff for the information they provide that helps me do my job.”

As a 21-year veteran of WIC and a longtime state employee, Grimm has witnessed the evolution of the WIC manual and computer systems.

“Darrell is courteous at all times. He is always willing to help with any question or concern. Darrell is always polite; whether it is in emails or on the phone. He has a monumental task, but never seems overwhelmed or bothered by the details. He responds promptly to all requests, no matter how unusual they seem.”

— the description that appeared on the nomination form

WIC Directors, WIC NECS Unit, the agency, the IT Section and the WIC Field Support Group congratulate Darrell Grimm on a job well done!



Darrell Grimm and Linda Brumble holding Customer Service Award.



Mary McIntosh and her baby Mary Elizabeth.

Mary McIntosh Becomes a Breastfeeding Coordinator

by Renee Mims

Mary McIntosh is on a mission: to share her knowledge and enthusiasm about breastfeeding as a peer counselor.

“The WIC program provided the training and the hours working with breastfeeding mothers,” she said. “WIC made it possible for me to become an International Board Certified Lactation Consultant (IBCLC) and a breastfeeding coordinator.”

Abilene’s WIC director, Annette Lerma, encourages clinics to train current employees for other positions within the clinic like peer counselor.

“It’s a win-win-win situation for WIC, the employee, and WIC moms who need breastfeeding support,” she said. “We are currently ‘grooming’ another peer counselor to take the IBCLC exam next year and hope to reap the benefits of her expertise for years to come as well!”

Lerma recognizes the talent and professionalism McIntosh brings to her position.

“Mary not only brings her personal experience to the job, (she breastfed all four of her children) but thousands of hours of helping moms and babies through La Leche League and WIC,” she said. “She is a natural leader and has earned the respect of not only her coworkers and other peer counselors, but also local lactation consultants and hospital medical staff.”

In her job, she maintains an inventory of breast pumps, resources and supplies, tracks peer counselor’s client appointments and training.

“Mary is passionate about breastfeeding! Lerma said. “I believe everyone was meant to have a mission in life and hers is helping moms breastfeed.”

She finds her work at the clinic rewarding.

“A good day at work is when I have successfully helped a mother who was having difficulties with breastfeeding,” McIntosh said. “I enjoy seeing the satisfaction and smile on a mother’s face when she leaves my office feeling confident in her ability to provide her milk for her baby.”

Tales from the Field: Different Approaches to Client-Centered Nutrition Education



by Matt Isbell, Ph.D.
The University of Texas at Austin Nutrition Education Group

There's a growing buzz about the move towards client-centered approaches to nutrition education. Many agency staff have participated in trainings that explored the "why" and "how" of client-centered nutrition education. Recent WIC News issues have presented articles on "embracing client-centered nutrition education" and "making pregnancy topics more client-centered." (See back issues at <http://www.dshs.state.tx.us/wichd/gi/wic-news.shtm> if you missed them.)

This article highlights client-centered strategies at four Texas local agencies and gives tips on how to incorporate ideas into your clinics.

Pioneers in the field

Local agencies that have created client-centered classes have found the shift rewarding and fun for everyone. Agencies of all sizes and locales are joining the client-centered movement and are finding out how easy it can be.

A big agency with a big plan

At Local Agency 26, City of Houston, nutrition education has never been more interactive. WIC clients in Houston can now "Catch Five" for better health. The Catch Five concept

brings nutrition education to life through interaction and comparison. Imagine classes where you set up a table or two and clients go from station to station learning about calories and food content while handling the products. In Catch Five, clients get that kind of experience. All the materials are easily stored in small plastic tubs when the class is over. No muss, no fuss, and completely client-centered.

A play on words "woks" for everyone

Want to get your clients active and healthy? At Local Agency 1, Austin, "Wok/Walk with WIC" is a client's passport to a healthier life. This program takes a two-pronged approach. In "Walk with WIC," clients are encouraged to sign up for an organized walking program led by WIC staff. Those who finish the program, which can take up to two months, receive perks and incentives to keep walking. Clients also learn about fitness and the importance of having peers support their efforts to get healthy. On the nutrition side, "Wok with WIC" makes cooking with fresh ingredients a snap. Every month, clients are invited to a cooking demonstration with WIC foods. These classes illustrate how easy it is to prepare healthy dishes. If you are interested in trying a food demonstration, visit www.texaswic.org for easy food recipes.

Growing interest through gardening

Got a green thumb? Gardening is a way to get your clients involved with fresh food; just ask the staff at Local Agency 87, Region 4/5N. It doesn't take much to create a garden. If your clinic has outdoor space, it could soon be growing tomatoes, chilies, and herbs. The Palestine clinic was able to build a small green house (with help from Obesity Mini-grant funds) and holds classes where clients learn how to grow their own foods. Don't have space for a green house? No problem. The Athens clinic turned a small piece of grass into an herb garden with a little initiative from the staff and some help from the local Boy Scouts.

Visualizing success

Small classroom changes can go a long way. Local Agency 10, Grayson County, created an active learning environment by putting chairs into a circle and breaking the "lecture" format that emphasizes passive learning. This change allows clients to participate and interact. Add a few open-ended questions and let clients build on conversations with each other. The open environment allows clients to express themselves and gives them an active role in learning. Try a question like, "What is your favorite vegetable and what 'secrets' can you share about how you prepare it?" Another addition is using visuals. Grayson clinic staff have produced simple, eye-catching visual aids to get clients' attention and spur conversations. Many people are visual learners, so this can bring home a point. For example, grab a few pictures of gum disease and tooth decay from Google Images (images.google.com) when talking about dental health. You can spice up any lesson with printed images or a "grab bag" of visual aids (see example on the right).

Steps to Success

Small changes, like rearranging chairs and adding visual aids or open-ended discussion questions, can go a long way. The key is to start small and expand on what you are already doing and to take advantage of the resources you have in your agency and the community. How can your agency get on board with the client-centered education movement?

Postpartum Grab Bag Lesson

A client-centered lesson on postpartum self-care can start with a grab bag of items to spark conversation. Gather items in a container or bag and bring them to class. Some items to include:

- Tennis shoe
- Crying baby
- Healthy food item
- Water bottle
- Squeeze ball
- Pillow
- Watch/timer
- Sunscreen
- Picture of the beach or sand and shells

After an icebreaker, participants choose an item to begin discussion. Guide the conversation by using the following structure:

1. Ask participants why they chose an item or what the item makes them think about.
2. Listen to responses. Try to relate the item to postpartum self-care. Ask other participants to share ideas and see where the conversation flows.
3. Prepare additional questions for each item to keep the conversation going. For example:

Healthy food item

- How is eating healthy related to your wellbeing and your baby's health?
- When was the last time you had a good meal?

Timer

- How do you feel about your time now compared to before the baby?
- Some women have said that they feel like they don't have time to get things done. What advice would you give a mom in this situation?

Tennis shoe

- What can you do to get back into shape?
- What do you do with your baby when you are exercising?

Pillow

- What can you do to get enough sleep?
- How do you feel when you've had enough sleep? When you haven't?

Wrap-up the lesson by summarizing self-care techniques discussed, sharing postpartum resources and asking clients to describe something they will do to take care of themselves.

High Risk WIC Participants *More* Susceptible to the H1N1 Influenza Virus



This winter, more than any in recent memory, shaped up to be one of the worst flu seasons on record. In April 2009, the first case of the H1N1 flu virus was identified in Mexico and by June 2009, the Swine Flu, as it was originally dubbed, was declared a pandemic. This is the first flu pandemic that has been declared in 41 years, according to the Centers for Disease Control and Prevention (CDC). Although nobody really knows when the outbreak will peak, over the past 26 flu seasons, defined as October through March, February is most often the month with the greatest number of reported cases of the flu.

For the majority of people, the H1N1 flu causes mild symptoms such as body aches, fever, cough, runny nose and sometimes vomiting and diarrhea. But, certain groups of people have been identified as being at particularly high risk for developing complications, such as severe respiratory disease, pneumonia and, although rare, even death from this flu strain.

This article will describe WIC participants who are at highest risk of developing severe complications from the H1N1 flu and will suggest steps that WIC staff might consider to help these participants avoid contracting this potentially life-threatening disease.

WIC Participants at Increased Risk

The following groups of WIC participants have been identified as being more susceptible to contracting the H1N1 flu and/or experiencing severe complications.

- Children under the age of five, and especially under age 2, tend to experience more severe symptoms than older children.
- Pregnant women are at risk of getting the most severe complications, presumably because pregnancy depresses the immune system and decreases lung capacity.
- Infants 6 months and younger are at higher risk, and they are not allowed to get the vaccination due to lack of safety data available for this age group.
- Premature infants, particularly those who have a history of respiratory problems are more likely to experience complications.
- Older and young adults and children who have underlying chronic disease are at increased risk.

In the September 2009 issue of the CDC's, *Morbidity and Mortality Weekly Report*, data was published related to children who died after contracting the H1N1 flu. After that, the American Academy of Pediatrics and the CDC formed a work group to identify those children who warranted closer follow-up and treatment after contracting H1N1. These children included those who have underlying medical conditions, specifically:

Neurological disorders such as:

- Cerebral palsy, especially those who have developmental disabilities or delays
- Epilepsy (seizure disorder)
- Neuromuscular disorders with impaired lung function

Lung Disease such as:

- Cystic fibrosis or other conditions that create difficulty handling secretions
- Asthma (8 percent of all children have asthma)
- Disorders that require the child to receive oxygen, have a tracheotomy or ventilator to facilitate breathing

Impaired Immune systems such as:

- Children undergoing treatment for cancer
- HIV/AIDS
- Conditions that require the use of steroids
- Organ transplant recipients

Also included are children with congenital heart disease, metabolic disorders, such as diabetes, kidney disease, blood disorders, such as sickle cell disease or liver disease.

Recommendations for WIC Staff

Here are some suggestions that WIC staff should consider doing to help participants and

staff avoid contracting the H1N1 flu now or for future outbreaks:

1. Encourage exclusive breastfeeding, especially for the first 6 months. Infants who are not breastfed are particularly vulnerable to respiratory illnesses, including the flu, and face a significantly higher risk of hospitalization. For women who have H1N1 flu, the CDC has issued recommendations on their website for the breastfeeding mother: <http://www.cdc.gov/h1n1flu/infantfeeding.htm>.
2. Remind or advise caregivers of young children, ages 6 months through 4 years, to get them immunized.
3. Encourage pregnant women to receive the vaccine. The vaccine can be given at any time during pregnancy, even in the very early or late stages, and may provide protection for the infant who cannot get the vaccine.
4. Accept or encourage medically vulnerable participants to obtain a physical presence waiver, such as premature infants and children with underlying medical conditions and those requiring equipment to help them breathe. The CDC has recommended that individuals at highest risk avoid large gatherings of people in order to limit their chances of contracting the disease.
5. Finally, check the CDC website <http://www.cdc.gov/h1n1FLU/> periodically, to keep up to date. Recommendations and new information is continually evolving regarding this new H1N1 virus.

“... certain groups of people have been identified as being at particularly high risk for developing complications ...”

Meet the 2010 Texas WIC Dietetic Interns



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

Back row left to right: Vanessa Patterson, Brittany Sparks, Kelley Williams, Ancy Alexander, Manrique Fuentes, and Flavia Galarraga. Front row left to right: Nina Norouzi, Vanessa Enriquez, Mary Aviles, and Gabriela Gardner.

Ancy Alexander

Ancy Alexander has been working for Local Agency 38 in Corpus Christi for more than a year. She loves her job and the opportunity it gives her to interact with different people every day.

A graduate from Texas A&M University with a degree in nutritional sciences, Alexander loves to travel and spend time at the beach during her free time.

She applied for the internship to develop her skills in dietetics and to become an asset to her local agency.

“With a growing case load, I wanted to do my part in meeting the needs of our participants. I plan to continue working for Project 38 as their full time RD in order to serve high risk clients and eventually pursue a graduate degree in Public Health,” she said.

Manrique Fuentes

Manrique Fuentes has been working for the United Medical Centers Eagle Pass WIC Program, Project 24 for 19 months.

A graduate of The University of Texas at Austin, with a Bachelor of Science in Nutrition and Dietetics degree, Fuentes’ desire to make a contribution to his community drew him to the internship opportunity.

“I want to broaden my knowledge in nutrition education with specialized training, which I hope to achieve through this internship,” said Fuentes. With RD credentials Fuentes looks forward to showing participants that smart choices really do make healthy families!

Brittany Sparks

Brittany Sparks from Warsaw, Kentucky, currently lives in Stephenville, Texas and works for Outreach Health Services, Area 1 Local Agency 76 at the Mineral Wells WIC Clinic.

Sparks graduated from the University of Kentucky, with a degree in dietetics nutrition and food science.

Sparks received her internship acceptance letter the day she got back from her honeymoon. Sparks looks forward to gaining the education necessary to become a dietitian and provide WIC clients with vital information and resources they need to lead a healthier lifestyle.

“I remember a turning point in my life where I had to choose to major in music or dietetics in college. It was then that I realized I could not live the rest of my life without the knowledge I desired to know about food and nutrition,” she said.

Gabriela Gardner

Born in Mexico City, Gabriela Gardner grew up in the southern area of Mexico. For the past two years she has worked for Local Agency 17 in Houston.

She started her nutrition education in Merida, Mexico, and then moved to Houston as an international exchange student. Gardner graduated from University of Houston in 2007 with a degree in human nutrition and foods.

“I have always liked working with people in the community and as an undergraduate student at the University of

Houston I became involved on a research project about teaching young girls nutrition information ...," she said.

Gardner wants to become a registered dietitian. She likes working with kids and would like to work in a pediatric area with obesity prevention or with children that have feeding problems or special health care needs.

Mary Aviles

Mary Aviles, originally from San Antonio, has been working with WIC since June 2008 at Local Agency 73.

A graduate of The University of Texas at Austin with a degree in nutrition, Aviles is very interested in helping the people in her community.

Through the internship she hopes to gain knowledge and experience that will help her counsel high-risk participants. As a breastfeeding advocate, she is interested in becoming an expert on breastfeeding.

"I want to continue working here at WIC to ensure that all families receive appropriate nutrition education and guidance," she said.

Vanessa Enriquez

Originally from Luling, Texas, Vanessa Enriquez has been working at Local Agency 32-BVCAA WIC in Bryan since December 2007.

A graduate of Texas A&M University with a degree in nutritional sciences, Enriquez has wanted to become a registered dietitian since college.

"I want to gain the ability to offer specialized services for participants with high risk nutritional issues and help them to find a solution to their problems," she said.

In the future, Enriquez would like to remain with the WIC program and continue to work with high risk families.

Nina Norouzi

Naghmeh Norouzi is her birth name, but everyone knows her as "Nina." Currently a full-time supervisor at the Mesquite clinic for Local Agency 07 in Dallas, Nina has been working with WIC for 18 months.

After graduating from California State University Northridge with a degree in dietetics and a minor in food science, Norouzi went on to get her master's degree in public health nutrition in Sweden. She now hopes to gain higher knowledge in clinical nutrition therapy through the WIC dietetic internship.

"I truly believe our job is one of the most rewarding jobs,

because of all the positive feedback we get every day from parents," she said.

Kelley Williams

Originally from Andrews, Texas, Kelley Williams is the clinic supervisor for the Waxahachie WIC Clinic for Local Agency 76.

A graduate of Texas Tech University with a degree in food and nutrition, Williams is happily married with two beautiful daughters.

As a participant in the Texas WIC Dietetic Internship program, Williams wants to fulfill her goal of becoming a registered dietitian. She also hopes to gain a greater understanding of disease states and how they affect nutritional status.

"This dream has been a very long time in the making and I am so excited to have the opportunity to participate in this internship through the WIC Program," she said.

Flavia Galarraga

Originally from Sao Paulo, Brazil, Flavia Galarraga has lived in Denton for almost ten years. She currently works for the Denton County Lewisville WIC agency 35.

A graduate from Abilene Christian University with both a degree in food, nutrition and dietetics and a degree in missions, Galarraga plans to become a registered dietitian.

Through the internship she seeks to increase her knowledge in nutrition and acquire experience in all areas of dietetics, especially clinical.

"I plan to start a high-risk program at my local agency by providing clients with effective frequent counseling sessions, which would empower them to achieve better health," she said.

Vanessa Patterson

For more than 18 months Vanessa Patterson has worked for Local Agency 7 in Dallas. She has found that working in her hometown is a rewarding opportunity to give back to the community she grew up in.

Patterson is a 2007 graduate of Texas State University in San Marcos, with a bachelors of science in nutrition and foods. Today she is excited about the WIC Dietetic Internship and the opportunity it offers to further her education so she can help those in need.

Vanessa enjoys cooking and sharing her knowledge and creativity with those around her. She and her husband have a son born in early 2009.



Coconuts, Nuts and a Whole Lot

by Elizabeth “Liz” Bruns, R.D., L.D.
Nutrition Training Specialist

Coconuts are a primary food source in many areas of the world including parts of India, south-east Asia, the Pacific islands, South America and Florida. Participants in the Texas WIC program can now enjoy fresh coconuts as a part of their fruit and vegetable cash value benefits.

Coconut Foods

Many foods and non-food items are made from coconuts. Some of the foods include:

- Coconut “meat” – the fresh fruit of the coconut
- Coconut palm sap – a sweet, white wine made from fermented coconut tree sap
- Arrack – a strong coconut liquor
- Coconut vinegar
- Hearts of palm – cylindrical stalks from new, unopened leaf shoots at the top of coconut trees
- Sweetened and unsweetened coconut milk and cream – commonly used in popular tropical beverages
- Dried/flaked coconut
- Coconut water
- Coconut oil

Are Coconut Products Good or Bad?

The coconut is a nutritious fruit, high in fiber and vitamins and minerals. Coconuts are classified as “functional foods,” which means they provide health benefits in addition to the nutrients they contribute.

The fat in coconut oil is 92 percent saturated, and saturated fat is generally not considered a good thing. However, in moderation coconut oil has some redeeming qualities. First, it consists primarily of medium-chain triglycerides (MCTs). MCTs are absorbed by the body as free medium-chain fatty acids and do not require lipase or bile salts for digestion and absorption. Second, coconut oil is especially high in a

fatty acid called lauric acid. There are few food sources of lauric acid. Human breastmilk, and cow and goat milks are the only other foods that contain significant amounts of lauric acid.

Studies have shown that virgin coconut oil does not raise cholesterol or LDL (low-density lipoproteins) levels, and may raise HDL (high-density lipoproteins) levels, keeping blood fats in a desirable ratio. It can be noted that in areas of the world where coconuts provide a majority of the populations’ calories, there is less incidence of heart disease, atherosclerosis, and obesity.

Coconut Water

Coconut water is the liquid inside an unripe coconut. Many people are drinking coconut water instead of sports drinks because coconut water is effective in replacing fluid and electrolytes lost during physical activity. Sports drinks are commonly high in sugar or high-fructose corn syrup, whereas coconut water contains only natural sugars.

Types of Coconut Oil

There are several types of coconut oil. The more common types are described here:

Virgin coconut oil is produced from fresh coconuts with minimal processing. It has a mild coconut aroma and flavor. Virgin coconut oil is recommended for food preparation and home medicinal use.

Refined, Bleached and Deodorized (RBD) coconut oil is made from copra, which is dried coconut kernel. RBD coconut oil is considered “crude” and not for human consumption due to contaminants from chemical processing.

Hydrogenated coconut oil is coconut oil that is further saturated through processing to form a fat that will not melt at higher temperatures. Hydrogenated coconut oil is commonly used in chocolate candy.



More

Fractionated coconut oil is coconut oil in which the long-chain fatty acids have been removed, leaving only the medium-chain fatty acids. It's typically referred to as MCT oil and is used most often for medicinal purposes and with special diets.

Using Coconut and Coconut Oil

Coconut oil can be used similarly to other cooking oils. The virgin form is recommended and it has a mild coconut aroma and flavor. Coconut oil works best in savory Asian dishes and with desserts and sweets. Consider using coconut oil when making French toast, rice pudding, and stir-fries. You might even want to try the following recipe.

Kona Coconut Stir Fry

1 tablespoon olive oil
1-2 tablespoon water
1 large carrot, cut into julienne sticks about 2 inches long
1 yellow bell pepper, cut into ½ inch slices
½ red bell pepper, cut into ½ inch slices
1 zucchini, cut into thick julienne sticks about 2 inches long
5 ounce portabella mushrooms, sliced thick
1 cup firm tofu, cut into bite-size cubes
1 cup fresh shredded coconut (dried coconut may be substituted)
1 ounces dried, diced apple, mango, or papaya
½ tablespoon soy sauce
3 dashes Tabasco Sauce
Salt and pepper

Heat oil and water in large, deep skillet. Add vegetables and sauté over high heat until softened, about 7 to 8 minutes, stirring frequently. Add more water if necessary to keep veggies from drying out. Turn heat down and add tofu, coconut, apple, soy sauce and Tabasco. Stir well and season to taste with salt and pepper.

Transfer to serving dish and sprinkle with sesame seeds. Serve over brown rice. Serves 2.

Putting Coconuts into Perspective

The coconut, coconut oil and other coconut products have their place in the diet. As part of a varied diet, coconut, in its various forms, should be included occasionally, especially if it's a preferred food. And coconut water is a good choice when the alternative is a sports drink.

As far as oils go, using virgin coconut oil occasionally may be beneficial in its contribution of MCTs and lauric acid to the diet; however, most nutrition professionals would recommend unsaturated vegetable oils, such as olive and safflower oils for routine use.

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