5-2-1-0 Healthy Habits Toolkit for Maternal & Child Health Care Providers

June 29, 2020

Welcome and Housekeeping

Your microphones are muted and video is turned off during the webinar

If you have questions or comments, please type them in the chat and we will respond at the end of the webinar

This webinar will be recorded and the slides will be made available after the webinar at the following link https://www.iowamedical.org/5-2-1-0-Home-Page

- They will also be posted and shared on the WIC and MCAH websites

If you need technical support contact James Olson, IDPH staff, by email at james.olson@idph.iowa.gov, or phone at 515-298-2003

Introductions

Jennifer Groos,
MD- Pediatrician
Primary Health Care Clinic
5-2-1-0 Health Care

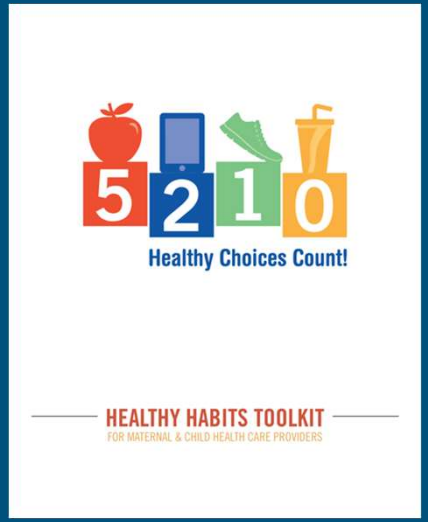
Stephanie Trusty,
RN, BSN
Nurse Clinician
IDPH

Nicole Newman,
RD, LD, CLC
State WIC Breastfeeding Coordinator, IDPH

Objectives

1. Utilize key anticipatory guidance to support early healthy habit formation that aligns with 5-2-1-0 framework.
2. Identify key resources to support families in understanding responsive feeding practices.
3. Name two motivational interviewing techniques to utilize when using brief action planning to partner with families on goal setting for healthy habits.
4. Describe the goals of the Special Supplemental Program for Women, Infants, and Children.
5. Identify three pregnancy outcomes that are impacted by healthy eating habits and exercise.

Toolkit Overview Use in the Clinical Setting



Jennifer Groos, MD, FAAP
5-2-1-0 Health Care Program
Pediatrician, Primary Health Care-BEC Clinic
@jengroosmd/ jagiowa@gmail.com

Foundation of Health

- Foundation of a person’s lifelong health is set long before adulthood
- Pregnancy- maternal health and habits influence the prenatal environment of the developing fetus
- Early Infancy-Early Childhood- development of healthy habits is influenced by the family environment
- Important window of time to influence children’s predisposition to obesity and other chronic diseases

Growth Trends

- 1 of 3 children have obesity or excess weight before their 5th birthday
- Rate of obesity in children is increasing in 2-5 years old
  - 4.8% 1971
  - 12.4% 2010
  - 13.9 % 2015
- Children who are diagnosed as having overweight or obesity as preschoolers are 5 times as likely as children with normal weight to have overweight or obesity as adults
- Declining rates in WIC Participants
- Due to revised WIC package 2007-2009 and increase in breastfeeding rates in this population

Complications- Youth

Complications-Adult

Growth Charts

- Research indicates few parents understand growth charts and the concept of percentiles
- Growth Curves
  - Birth to < 2 years old use the WHO growth charts-weight for length
  - 2-18 years old use the CDC-BMI percentile
  - Watch for acceleration of growth across percentiles
- Shift the focus from the chart to the health risks

Growth Charts

https://www.youtube.com/watch?v=G_Gza9y9IDU&t=36s

Weight Stigma

Negative bias that individuals may hold in relation to people with overweight or obesity, including viewing these people as lazy, lacking in self control, unpleasant, non-compliant or less desirable to care for contributes to weight stigma.

Negative Health Consequences

Evaluate implicit bias and complete an environmental assessment

Weighing and measuring youth best practices

Ask permission to have a conversation about health

Choose words wisely. Consider height, weight, BMI, growth. Avoid fat, obese, overweight, and chubby.

Pont SJ, Puhl R, Cook SR, et al, AAP SECTION ON OBESITY, THE OBESITY SOCIETY. Stigma Experienced by Children and Adolescents With Obesity. *Pediatrics.* 2017;140(6): e20173034

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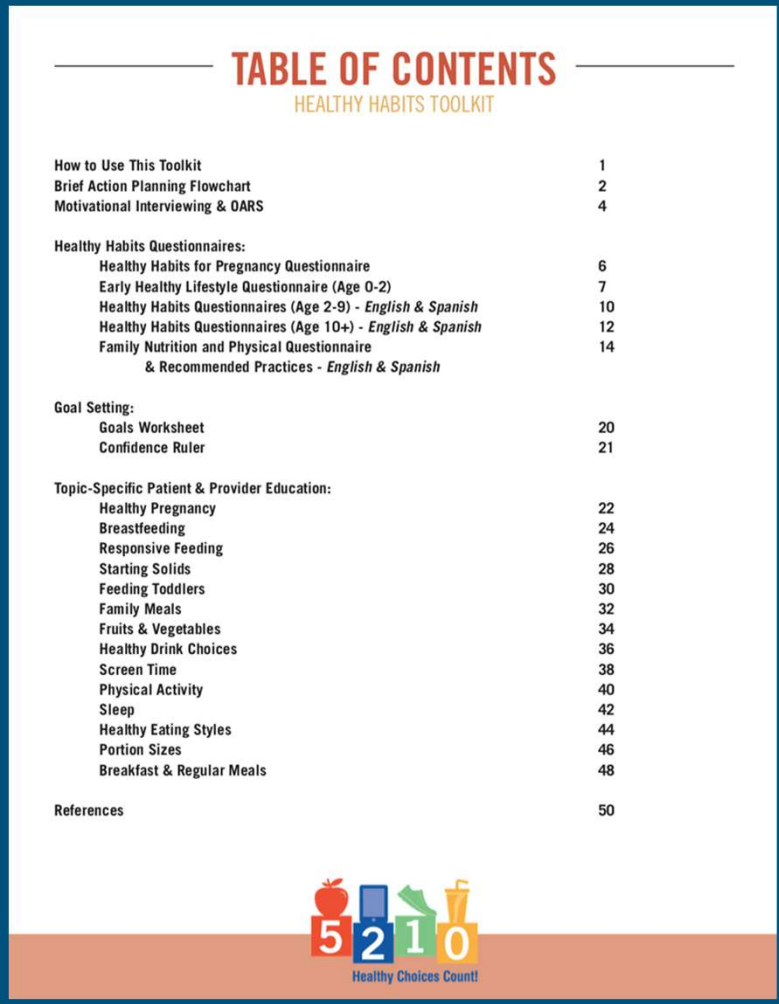

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Family Nutrition and Physical Activity Screening (FNPA) Tool

Healthy Habits during Pregnancy

Physical Activity

Nutrition/Mindful eating

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Stress Management

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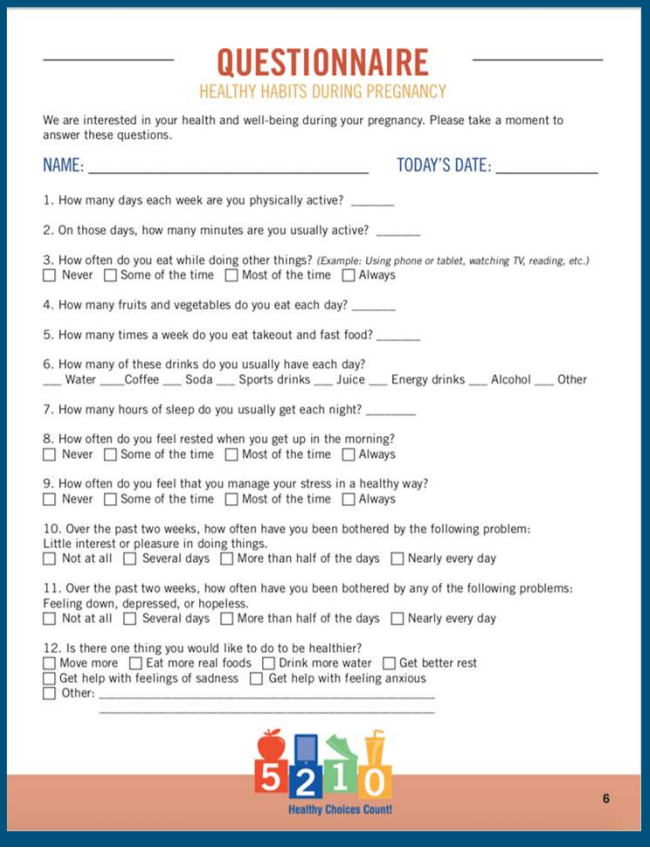
Patient Goals



QUESTIONNAIRE

HEALTHY HABITS DURING PREGNANCY

We are interested in your health and well-being during your pregnancy. Please take a moment to answer these questions.

NAME: _____ TODAY'S DATE: _____

1. How many days each week are you physically active? _____

2. On those days, how many minutes are you usually active? _____

3. How often do you eat while doing other things? *(Example: Using phone or tablet, watching TV, reading, etc.)*
☐ Never ☐ Some of the time ☐ Most of the time ☐ Always

4. How many fruits and vegetables do you eat each day? _____

5. How many times a week do you eat takeout and fast food? _____

6. How many of these drinks do you usually have each day?
___ Water ___Coffee ___ Soda ___ Sports drinks ___ Juice ___ Energy drinks ___ Alcohol ___ Other

7. How many hours of sleep do you usually get each night? _____

8. How often do you feel rested when you get up in the morning?
☐ Never ☐ Some of the time ☐ Most of the time ☐ Always

9. How often do you feel that you manage your stress in a healthy way?
☐ Never ☐ Some of the time ☐ Most of the time ☐ Always

10. Over the past two weeks, how often have you been bothered by the following problem:
Little interest or pleasure in doing things.
☐ Not at all ☐ Several days ☐ More than half of the days ☐ Nearly every day

11. Over the past two weeks, how often have you been bothered by any of the following problems:
Feeling down, depressed, or hopeless.
☐ Not at all ☐ Several days ☐ More than half of the days ☐ Nearly every day

12. Is there one thing you would like to do to be healthier?
☐ Move more ☐ Eat more real foods ☐ Drink more water ☐ Get better rest
☐ Get help with feelings of sadness ☐ Get help with feeling anxious
☐ Other: _____
_____

5 2 1 0
Healthy Choices Count!

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Early Healthy Lifestyle Assessment

QUESTIONNAIRE

EARLY HEALTHY LIFESTYLE (AGES 0-2)

PATIENT NAME: _____ TODAY'S DATE: _____

1. What is your relationship to the patient being seen for an appointment today?
- ☐ I live with this child and care for him/her regularly
- ☐ I do not live with this child but care for him/her regularly
- ☐ I do not live with this child and I do not care for him/her regularly

2. Select beverages that your child drank in the past week:
- ☐ Breast milk 
- ☐ Formula 
- ☐ Milk 
- ☐ Water 
- ☐ 100% Juice 
- ☐ Fruit punch, fruit drink, lemonade, soda 

3. Select foods that your child ate in the past week:
- ☐ Cake, cookies, pudding 
- ☐ Sweet cereal 
- ☐ French fries, potato chips 
- ☐ Hot dog, breaded chicken patty or nuggets, macaroni and cheese 
- ☐ None of the foods listed

QUESTIONNAIRE

EARLY HEALTHY LIFESTYLE (AGES 0-2)

— CONTINUED —

Think about the past week when answering the next set of questions:

4. When preparing a bottle, how many ounces did you put in the bottle at each feeding?
- ☐ My child does not drink from a bottle
- ☐ 1-2 ounces
- ☐ 3-4 ounces
- ☐ 5-6 ounces
- ☐ 7-8 ounces
- ☐ More than 8 ounces

5. How sleepy is your child when you put him/her to bed?
- ☐ Wide awake 
- ☐ Awake but drowsy/sleepy 
- ☐ Already asleep 

6. What time do you usually put your child to sleep? _____

7. How many times does your child typically wake per night?
- ☐ Does not wake at night
- ☐ 1 time per night
- ☐ 2 times per night
- ☐ 3 times per night
- ☐ 4 or more times per night
- ☐ More than 8 ounces

Skip #8 if response to #7 is "Does not wake at night."

8. Do you usually feed your child when he/she wakes at night?
- ☐ Yes
- ☐ No

QUESTIONNAIRE

EARLY HEALTHY LIFESTYLE (AGES 0-2)

— CONTINUED —

Think about the past week when answering the next set of questions:

9. When at home, how often does your child have tummy time or active play time on the floor (laying, sitting, crawling, walking) each day?
- ☐ None
- ☐ Once per day
- ☐ 2-4 times per day
- ☐ 5 or more times per day

10. How often do you tend to be on your cell phone or watching TV while playing with your child?
- ☐ Rarely
- ☐ Sometimes
- ☐ Usually
- ☐ Often

11. When it comes to eating, my child: *(check all that apply)*
- ☐ Doesn't eat much
- ☐ Is always hungry
- ☐ Eats too much
- ☐ Eats the right amount
- ☐ Spits out healthy food
- ☐ Is picky

	YES	NO
12. I sometimes nurse, give a bottle, or something to eat as a way to keep my child quiet or to calm my child when he/she is upset.	☐	☐
13. I try to get my child to finish his/her bottle, snacks or meals.	☐	☐
14. Do you usually use a cellphone, laptop or computer, or have the television on when you are feeding or playing with your child?	☐	☐
15. Is the television usually on in the room where your child goes to sleep at night?	☐	☐


The Early Healthy Lifestyle Assessment was developed by: Lisa Bailey-Davis, DEd, RD, Associate Professor, Population Health Sciences and Associate Director, Obesity Institute, Geisinger, Danville, PA; ldbaileydavis@geisinger.edu; and Jennifer Savage Williams, PhD, Associate Professor, Nutritional Sciences and Director, Center for Childhood Obesity Research, Pennsylvania State University, University Park, PA; jfs195@psu.edu. The EHL development was supported, in part, by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) under grant number R40MC28317, Maternal and Child Health Field-initiated Innovative Research Studies Program.

Healthy Habits

Ages 2-9 and Ages 10+

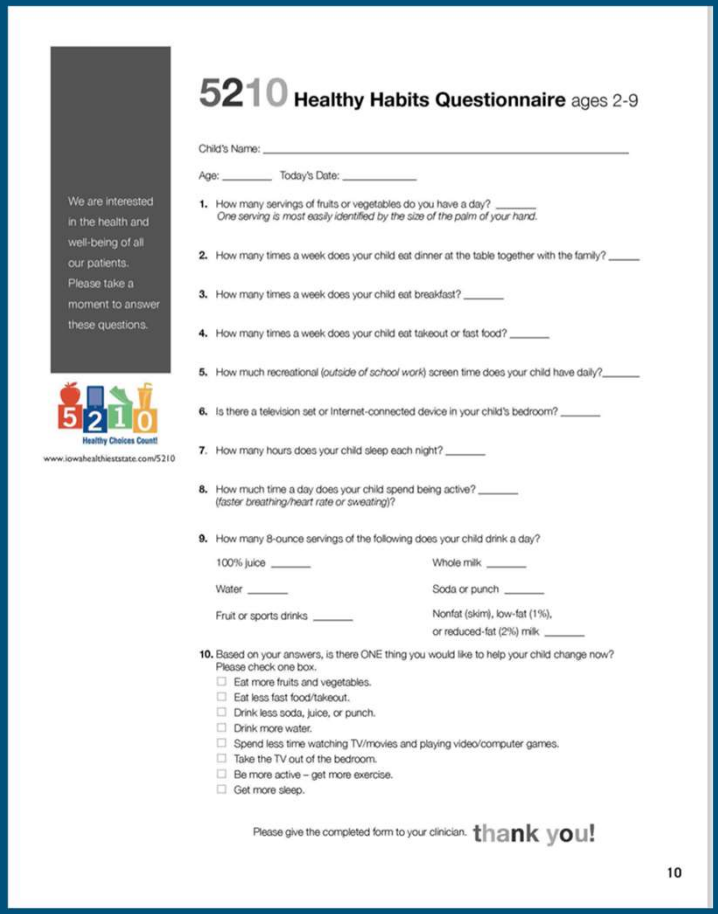
Nutrition/Beverage choice

Physical Activity

Sleep

ScreenTime

Goals



We are interested in the health and well-being of all our patients. Please take a moment to answer these questions.

5210 Healthy Choices Count!

www.iowahealthieststate.com/5210

5210 Healthy Habits Questionnaire ages 2-9

Child's Name: _____

Age: _____ Today's Date: _____

1. How many servings of fruits or vegetables do you have a day? _____
   One serving is most easily identified by the size of the palm of your hand.
2. How many times a week does your child eat dinner at the table together with the family? _____
3. How many times a week does your child eat breakfast? _____
4. How many times a week does your child eat takeout or fast food? _____
5. How much recreational (*outside of school work*) screen time does your child have daily? _____
6. Is there a television set or Internet-connected device in your child's bedroom? _____
7. How many hours does your child sleep each night? _____
8. How much time a day does your child spend being active? _____
   (*faster breathing/heart rate or sweating*)?
9. How many 8-ounce servings of the following does your child drink a day?

100% juice _____	Whole milk _____
Water _____	Soda or punch _____
Fruit or sports drinks _____	Nonfat (skim), low-fat (1%), or reduced-fat (2%) milk _____

10. Based on your answers, is there ONE thing you would like to help your child change now? Please check one box.
    - ☐ Eat more fruits and vegetables.
    - ☐ Eat less fast food/takeout.
    - ☐ Drink less soda, juice, or punch.
    - ☐ Drink more water.
    - ☐ Spend less time watching TV/movies and playing video/computer games.
    - ☐ Take the TV out of the bedroom.
    - ☐ Be more active – get more exercise.
    - ☐ Get more sleep.

Please give the completed form to your clinician. **thank you!**

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QUESTIONNAIRE

FAMILY NUTRITION & PHYSICAL ACTIVITY

Instructions: For each question, select the answer category that best fits your child or your family. It is important to indicate the most common or typical pattern for your family, and not what you would like to happen.

NAME: _____ TODAY'S DATE: _____

FAMILY MEALS	Never/ Almost Never	Sometimes	Often	Very Often/ Always
1. How often does your child eat breakfast, either at home or at school?	1	2	3	4
2. How often does your child eat at least one meal a day with at least one other family member?	1	2	3	4
FAMILY EATING PRACTICES	**Never/ Almost Never**	**Sometimes**	**Often**	**Very Often/ Always**
3. How often does your child eat while watching TV? [Includes meals or snacks]	4	3	2	1
4. How often does your family eat "fast food?"	4	3	2	1
FOOD CHOICES	**Never/ Almost Never**	**Sometimes**	**Often**	**Very Often/ Always**
5. How often does your family use packaged "ready-to-eat" foods? [Includes purchased frozen or on-the-shelf entrees, often designed to be microwaved]	4	3	2	1
6. How often does your child eat fruits and vegetables at meals or snacks? [Not including juice]	1	2	3	4
BEVERAGE CHOICES	**Never/ Almost Never**	**Sometimes**	**Often**	**Very Often/ Always**
7. How often does your child drink soda pop or sweetened beverages? [Includes regular or diet soda pop, Kool-Aid, Sunny-D, Capri Sun, fruit or vegetable juice, caffeinated energy drinks (Monster/Red Bull), Powerade/ Gatorade.]	4	3	2	1
8. How often does your child drink low-fat milk for meals or snacks? [Includes 1% or skim dairy, flavored, soy, almond, etc.]	1	2	3	4
RESTRICTION/REWARD	**Never/ Almost Never**	**Sometimes**	**Often**	**Very Often/ Always**
9. How often does your family monitor the amount of candy, chips, and cookies your child eats?	1	2	3	4
10. How often does your family use candy, ice cream or other foods as a reward for good behavior?	4	3	2	1

5 2 1 0
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QUESTIONNAIRE

FAMILY NUTRITION & PHYSICAL ACTIVITY

— CONTINUED —

SCREEN TIME	Never/ Almost Never	Sometimes	Often	Very Often/ Always
11. How often does your child have less than 2 hours of "screen time" in a day? [Includes TV, computer, game system, or any mobile device with visual screens]	1	2	3	4
12. How often does your family monitor the amount of "screen time" your child has?	1	2	3	4
HEALTHY ENVIRONMENT	**Never/ Almost Never**	**Sometimes**	**Often**	**Very Often/ Always**
13. How often does your child engage in screen time in his/her bedroom?	4	3	2	1
14. How often does your family provide opportunities for physical activity?	1	2	3	4
FAMILY ACTIVITY	**Never/ Almost Never**	**Sometimes**	**Often**	**Very Often/ Always**
15. How often does your family encourage your child to be physically active?	1	2	3	4
16. How often does your child do physical activities with at least one other family member?	1	2	3	4
CHILD ACTIVITY	**Never/ Almost Never**	**Sometimes**	**Often**	**Very Often/ Always**
17. How often does your child do something physically active when he/she has free time?	1	2	3	4
18. How often does your child participate in organized sports or physical activities with a coach or leader?	1	2	3	4
FAMILY SCHEDULE/SLEEP ROUTINE	**Never/ Almost Never**	**Sometimes**	**Often**	**Very Often/ Always**
19. How often does your child follow a regular routine for your child's bedtime?	1	2	3	4
20. How often does your child get enough sleep at night?	1	2	3	4

www.myfnpa.org

Partnering for Behavior Change

Help patients improve their health or well-being by assisting them in setting goals around their desired health behavior outcomes.

•Brief Action Planning is patient-centered goal setting

•Based on the principles and practice of Motivational Interviewing

Reims et al, Brief Action Planning White Paper, 2014 Gutnick et al, JCOM, 2014 Available at www.centreCMI.ca

Information adapted from the Centre for Collaboration, Motivation, and Innovation

Brief Action Planning

Assessment

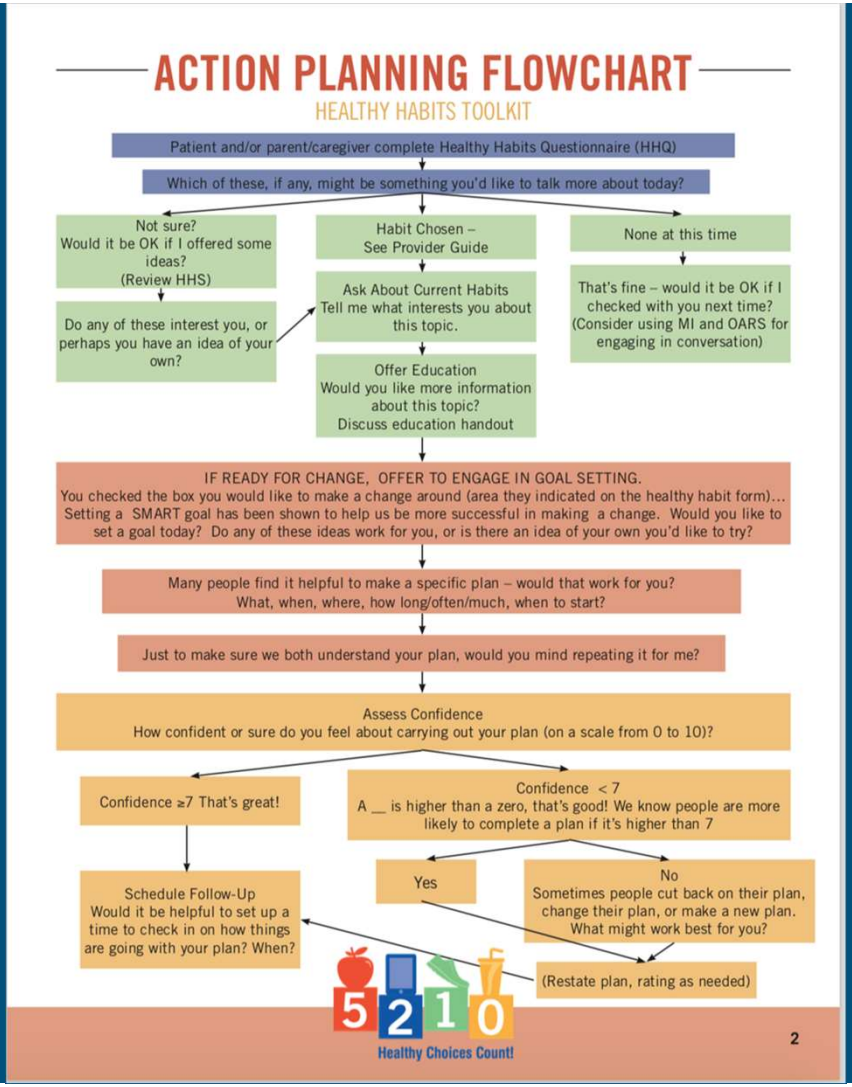
Guidance

Readiness for Change

Goal Setting

Assessing Confidence

Follow-Up Planning



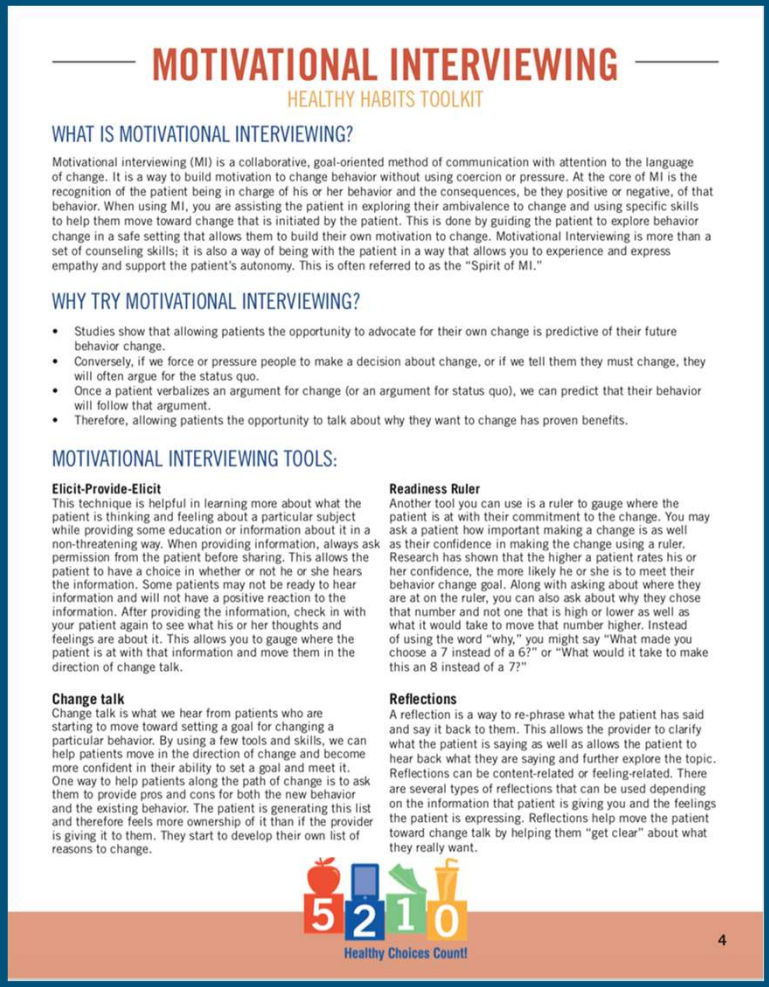
Motivational Interviewing

Elicit-Provide-Elicit

Readiness Ruler

Change Talk

Reflections



MOTIVATIONAL INTERVIEWING

HEALTHY HABITS TOOLKIT

WHAT IS MOTIVATIONAL INTERVIEWING?

Motivational interviewing (MI) is a collaborative, goal-oriented method of communication with attention to the language of change. It is a way to build motivation to change behavior without using coercion or pressure. At the core of MI is the recognition of the patient being in charge of his or her behavior and the consequences, be they positive or negative, of that behavior. When using MI, you are assisting the patient in exploring their ambivalence to change and using specific skills to help them move toward change that is initiated by the patient. This is done by guiding the patient to explore behavior change in a safe setting that allows them to build their own motivation to change. Motivational Interviewing is more than a set of counseling skills; it is also a way of being with the patient in a way that allows you to experience and express empathy and support the patient's autonomy. This is often referred to as the "Spirit of MI."

WHY TRY MOTIVATIONAL INTERVIEWING?

- Studies show that allowing patients the opportunity to advocate for their own change is predictive of their future behavior change.
- Conversely, if we force or pressure people to make a decision about change, or if we tell them they must change, they will often argue for the status quo.
- Once a patient verbalizes an argument for change (or an argument for status quo), we can predict that their behavior will follow that argument.
- Therefore, allowing patients the opportunity to talk about why they want to change has proven benefits.

MOTIVATIONAL INTERVIEWING TOOLS:

Elicit-Provide-Elicit
This technique is helpful in learning more about what the patient is thinking and feeling about a particular subject while providing some education or information about it in a non-threatening way. When providing information, always ask permission from the patient before sharing. This allows the patient to have a choice in whether or not he or she hears the information. Some patients may not be ready to hear information and will not have a positive reaction to the information. After providing the information, check in with your patient again to see what his or her thoughts and feelings are about it. This allows you to gauge where the patient is at with that information and move them in the direction of change talk.

Readiness Ruler
Another tool you can use is a ruler to gauge where the patient is at with their commitment to the change. You may ask a patient how important making a change is as well as their confidence in making the change using a ruler. Research has shown that the higher a patient rates his or her confidence, the more likely he or she is to meet their behavior change goal. Along with asking about where they are at on the ruler, you can also ask about why they chose that number and not one that is high or lower as well as what it would take to move that number higher. Instead of using the word "why," you might say "What made you choose a 7 instead of a 6?" or "What would it take to make this an 8 instead of a 7?"

Change talk
Change talk is what we hear from patients who are starting to move toward setting a goal for changing a particular behavior. By using a few tools and skills, we can help patients move in the direction of change and become more confident in their ability to set a goal and meet it. One way to help patients along the path of change is to ask them to provide pros and cons for both the new behavior and the existing behavior. The patient is generating this list and therefore feels more ownership of it than if the provider is giving it to them. They start to develop their own list of reasons to change.

Reflections
A reflection is a way to re-phrase what the patient has said and say it back to them. This allows the provider to clarify what the patient is saying as well as allows the patient to hear back what they are saying and further explore the topic. Reflections can be content-related or feeling-related. There are several types of reflections that can be used depending on the information that patient is giving you and the feelings the patient is expressing. Reflections help move the patient toward change talk by helping them "get clear" about what they really want.

5 2 1 0
Healthy Choices Count!

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GOALS WORKSHEET

HEALTHY HABITS TOOLKIT

NAME: _____ TODAY'S DATE: _____

FOLLOW-UP: _____

RECORD YOUR GOALS:

GOAL #1: _____

GOAL #2: _____

GOAL #3: _____

TRACK YOUR GOALS:

MONTH: _____						
MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY

MONTH: _____						
MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY

5 2 1 0 Healthy Choices Count!

CONFIDENCE RULER

HEALTHY HABITS TOOLKIT

On a scale of 1 to 10, how confident or sure do you feel about carrying out your plan?

1 2 3 4 5 6 7 8 9 10

Not Confident — Somewhat Confident — Very Confident

5 2 1 0 Healthy Choices Count!

Patient Education and Provider Guides

New Content

- Healthy Pregnancy
- Breastfeeding
- Responsive Feeding
- Starting Solids
- Feeding Toddlers

Previous Content

- Family Meals
- Fruits & Vegetables
- Healthy Drink Choices
- Screen Time
- Physical Activity
- Sleep
- Healthy Eating Styles
- Portion Sizes
- Breakfast and Regular Meals.

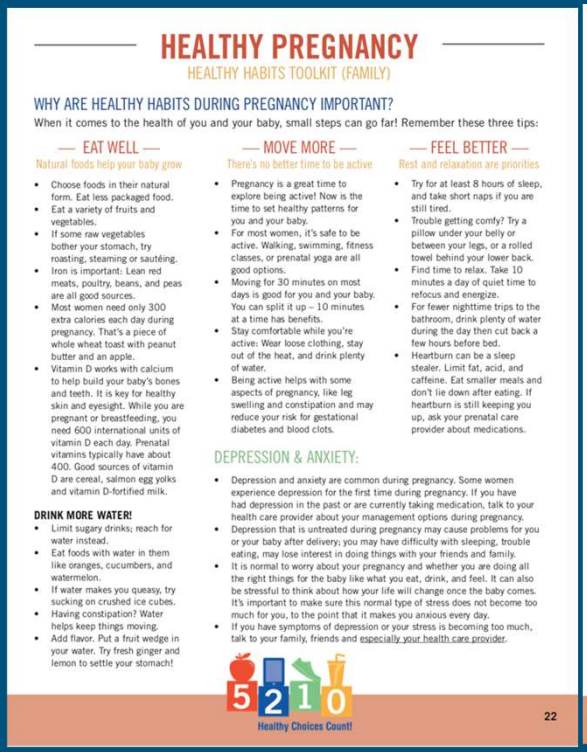
Healthy Pregnancy

Pregnancy Specific Guidance

Eat Well

Move More

Feel Better



HEALTHY PREGNANCY

HEALTHY HABITS TOOLKIT (FAMILY)

WHY ARE HEALTHY HABITS DURING PREGNANCY IMPORTANT?

When it comes to the health of you and your baby, small steps can go far! Remember these three tips:

— EAT WELL —

Natural foods help your baby grow

- Choose foods in their natural form. Eat less packaged food.
- Eat a variety of fruits and vegetables.
- If some raw vegetables bother your stomach, try roasting, steaming or sautéing.
- Iron is important: Lean red meats, poultry, beans, and peas are all good sources.
- Most women need only 300 extra calories each day during pregnancy. That's a piece of whole wheat toast with peanut butter and an apple.
- Vitamin D works with calcium to help build your baby's bones and teeth. It is key for healthy skin and eyesight. While you are pregnant or breastfeeding, you need 600 international units of vitamin D each day. Prenatal vitamins typically have about 400. Good sources of vitamin D are cereal, salmon egg yolks and vitamin D-fortified milk.

DRINK MORE WATER!

- Limit sugary drinks; reach for water instead.
- Eat foods with water in them like oranges, cucumbers, and watermelon.
- If water makes you queasy, try sucking on crushed ice cubes.
- Having constipation? Water helps keep things moving.
- Add flavor. Put a fruit wedge in your water. Try fresh ginger and lemon to settle your stomach!

— MOVE MORE —

There's no better time to be active

- Pregnancy is a great time to explore being active! Now is the time to set healthy patterns for you and your baby.
- For most women, it's safe to be active. Walking, swimming, fitness classes, or prenatal yoga are all good options.
- Moving for 30 minutes on most days is good for you and your baby. You can split it up – 10 minutes at a time has benefits.
- Stay comfortable while you're active: Wear loose clothing, stay out of the heat, and drink plenty of water.
- Being active helps with some aspects of pregnancy, like leg swelling and constipation and may reduce your risk for gestational diabetes and blood clots.

— FEEL BETTER —

Rest and relaxation are priorities

- Try for at least 8 hours of sleep, and take short naps if you are still tired.
- Trouble getting comfy? Try a pillow under your belly or between your legs, or a rolled towel behind your lower back.
- Find time to relax. Take 10 minutes a day of quiet time to refocus and energize.
- For fewer nighttime trips to the bathroom, drink plenty of water during the day then cut back a few hours before bed.
- Heartburn can be a sleep stealer. Limit fat, acid, and caffeine. Eat smaller meals and don't lie down after eating. If heartburn is still keeping you up, ask your prenatal care provider about medications.

DEPRESSION & ANXIETY:

- Depression and anxiety are common during pregnancy. Some women experience depression for the first time during pregnancy. If you have had depression in the past or are currently taking medication, talk to your health care provider about your management options during pregnancy.
- Depression that is untreated during pregnancy may cause problems for you or your baby after delivery; you may have difficulty with sleeping, trouble eating, may lose interest in doing things with your friends and family.
- It is normal to worry about your pregnancy and whether you are doing all the right things for the baby like what you eat, drink, and feel. It can also be stressful to think about how your life will change once the baby comes. It's important to make sure this normal type of stress does not become too much for you, to the point that it makes you anxious every day.
- If you have symptoms of depression or your stress is becoming too much, talk to your family, friends and especially your health care provider.

5 2 1 0 Healthy Choices Count!

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HEALTHY PREGNANCY

HEALTHY HABITS TOOLKIT (PROVIDER)

STEP 1: ASK ABOUT CURRENT HABITS

- Tell me what you know about staying healthy during pregnancy.

STEP 2: OFFER EDUCATION

"Would you like me to share more information about staying healthy during pregnancy?"

- If yes, discuss education handout. (If no, skip to goal setting)

Why is this important:

- "For the health of you and your baby, it is important that you practice healthy habits now."

What is recommended:

- "Eat Well – Fresh, natural foods help your baby grow. Drink water, not sugary drinks. It's the best choice for you and your baby."
- "Move More – There's no better time to be active."
- "Feel Better – Make time for sleep and relaxation. Get enough rest. Most adults need 7-9 hours of sleep per night."

How to implement:

- "The tips on this sheet are just a few ideas of how to stay healthy during pregnancy."
- "What are your thoughts about this?"

STEP 3: ENGAGE IN GOAL-SETTING

- "Do any of these ideas work for you, or is there an idea of your own you'd like to try?"
- "Many people find it helpful to make a specific plan – would that work for you?" Discuss what, when, where, how long/often/much, and when to start.
- "Just to make sure we both understand your plan, would you mind repeating it for me?"

STEP 4: ASSESS CONFIDENCE & SCHEDULE FOLLOW-UP

- "On a scale of 1 to 10, how confident or sure do you feel about carrying out your plan?"
  - Confidence ≥7 : "That's great!"
  - Confidence <7: "A ___ is higher than a zero, that's good! We know people are more likely to complete a plan if it's higher than 7. Any ideas about what might raise your confidence?"
- "Would it be helpful to set up a time to check in on how things are going with your plan? When works best?"

REFERENCES

- MaineHealth LET'S GO
- Your Pregnancy and Childbirth Month to Month Revised Sixth Edition, The American College of Obstetricians and Gynecologists
- Sleep hygiene recommendations from the American Sleep Association
- Kroenke K, Spitzer RL, Williams JB. The Patient Health Questionnaire-2: Validity of a Two-Item Depression Screener. Medical Care. 2003;41:1284-92.

Patient Health Questionnaire-2 (PHQ-2): PHQ-2 inquires about the frequency of depressed mood and anhedonia over the past two weeks. The PHQ-2 includes the first two items of the PHQ-9. The purpose of the PHQ-2 is to screen for depression in a "first-step" approach. Patients who screen positive should be further evaluated with the PHQ-9 to determine whether they meet criteria for a depressive disorder. Over the last 2 weeks, how often have you been bothered by the following problems? Not at all (score: 0) Several days (score: 1). More than half the days (score: 2) Nearly every day (score: 3) for the following two problems: "Little interest or pleasure in doing things" and "Feeling down, depressed or hopeless." The score is obtained by adding score for each question (total points). Interpretation: A PHQ-2 score ranges from 0-6. The authors identified a score of 3 as the optimal cutpoint when using the PHQ-2 to screen for depression. If the score is 3 or greater, major depressive disorder is likely. Patients who screen positive should be further evaluated with the PHQ-9, other diagnostic instruments, or direct interview to determine whether they meet criteria for a depressive disorder.

5 2 1 0 Healthy Choices Count!

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2 week visit

				
Family Nutrition	Limit parent screen time during infant feedings	Start tummy time	Encourage water intake for nursing moms RESPONSIVE FEEDING Support Breastfeeding-Critical Transitions 1) 2-4 weeks 2) 2 months	-Screen for maternal depression -Screen for food insecurity/connect to resources -Growth Charts

Breastfeeding

Benefits of breastfeeding

Recommendations

Tips for success

Resources for support

BREASTFEEDING

HEALTHY HABITS TOOLKIT (FAMILY)

WHY IS BREASTFEEDING IMPORTANT?

Breast milk is the best food for your baby. It:

- has all the nutrients your baby needs for proper growth and improved brain development
- reduces the risk of ear infections and colds
- reduces the risk of obesity, diabetes, and other diseases
- is easier for your baby to digest
- is always the right temperature, never too hot and never too cold

It's healthier for YOU too. Breastfeeding:

- can help you recover more quickly from childbirth
- reduces your risk for breast and ovarian cancer, type 2 diabetes and high blood pressure
- may help you lose weight after childbirth

Additional benefits of breastfeeding include:

- the convenience of not having to prepare bottles and formula
- it's better for the environment as less waste is produced
- more economical to not have to buy formula
- mothers miss less work as babies are healthier

RECOMMENDATIONS:

- Breastfeed your baby within the first hour after your baby is born
- Give only breast milk to your baby for the first 6 months
- Continue breastfeeding while introducing foods up until one year of age
- Breastfeed your baby as long as both mom and baby (or child) wish

TIPS FOR BREASTFEEDING SUCCESS:

What should I do if I need to be away from my baby for a long period of time?
Moms should express breast milk regularly while away from their baby. In general, removing milk as often as the baby would eat is best.

How do I know if my baby is getting enough breast milk?

- Babies that are getting enough milk are satisfied after feedings, have regular wet and dirty diapers and gain weight adequately.
- Breastfed babies eat often! They should nurse every 1-3 hours in the early days, up to 8-12 times each day. As babies get older, the number of feedings decrease as they are able to drink more during each feeding and start to eat baby foods.

What should I do if I have questions or problems?
If you are having trouble with breastfeeding, reach out for help! Contact a breastfeeding support person, such as a lactation consultant, doctor, dietitian, nurse, WIC peer counselor, etc.

QUICK TIP:

Breastfeeding your baby often will help your body keep up with your baby's growing stomach. The more breast milk your baby removes, the more milk you will produce.

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Responsive Feeding

Parent provides, child decides

Minimize distractions

Positive feeding times

Hunger and Fullness Cues

RESPONSIVE FEEDING

HEALTHY HABITS TOOLKIT (FAMILY)

WHY IS RESPONSIVE FEEDING IMPORTANT?

Children need a positive environment to explore and learn to eat a variety of healthy foods while listening to their own hunger and fullness cues. Practicing "parents provide, children decide" teaches children to self-regulate and develop healthy eating habits to avoid health problems in the future. It also makes mealtime easier, allowing you to bond with your child!

TIPS FOR SUCCESS:

- Make sure your child is comfortable and minimize distractions (turn off TV, don't use phone, etc.).
- Feed your child on demand when they are small. Children know how to regulate how much they need to eat and will give you signs of hunger or fullness.
- Respond promptly to cues and focus on being warm, nurturing and affectionate during feeding.
- Offer regular meals and snacks to ensure your child is hungry at mealtime.
- Be patient while feeding your child and watch for clues that your child is telling you when they are hungry and full.
- There are many reasons why babies cry. Often times babies cry because they need a change, or want to be near you. Early cues will tell you when your baby is hungry.

SIGNS OF HUNGER IN YOUNGER BABIES:

- Sucking on hands
- Rooting/turning their head toward anything that touches their face
- Opening their mouth
- Making feeding motions or sounds
- Increasing body movements, like flexing their arms and legs
- Clenching their fingers or fist over their chest and tummy

SIGNS OF FULLNESS IN YOUNGER BABIES:

- Stopping or slowing down sucking or unlatching
- Spitting out bottle or breast
- Sealing lips together
- Relaxing their body
- Falling asleep
- Fidgeting or getting distracted
- Turning their head away when offered the breast or bottle

SIGNS OF HUNGER IN OLDER BABIES:

- Showing interest in food
- Leaning towards the spoon
- Opening their mouth

SIGNS OF FULLNESS IN YOUNGER BABIES:

- Spitting out food
- Turning their head away
- Pushing the spoon away
- Sealing their lips closed
- Playing with or throwing food

5 2 1 0 Healthy Choices Count!

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AAP Responsive Feeding Video

https://www.healthychildren.org/English/ages-stages/baby/feeding-nutrition/Pages/Is-Your-Baby-Hungry-or-Full-Responsive-Feeding-Explained.aspx

2 month visit

				
-Discuss introduction of solids at 6 months -Screen for food insecurity/connect to resources -Family Nutrition	-Limit parent screen time during infant feedings -No screen media except video chatting until 18 mo	-Encourage tummy time/unrestricted movement -Discuss confining equipment- car seats, swings, bouncy seats, exersaucers, strollers -Family routines	-RESPONSIVE FEEDING -Support Breastfeeding- Critical Transition Periods 2) 2 months 3) 3-4 months	-Screen for Maternal Depression -Growth Charts -Sleep hygiene- infants should get between 9-12 hours of sleep at night and 1-4 naps a day that last between 30 minutes and 2 hours

4 month visit

				
-Family Nutrition -Discuss introduction of solids at 6 months	-No screen media except video chatting until 18 mo -Limit parent screen time during infant feedings -Introduce Screen Free Zones-bedtime, mealtimes, child-parent play times	-Encourage tummy time/unrestricted movement -Discuss confining equipment- car seats, swings, bouncy seats, exersaucers, strollers -Family routines	-Juice Avoidance Responsive Feeding -Support Breastfeeding-Critical Transition Periods 3) 3-4 months	-Sleep hygiene -Family as Role Models-mealtimes and parent self-care

Starting Solids

Readiness for solids

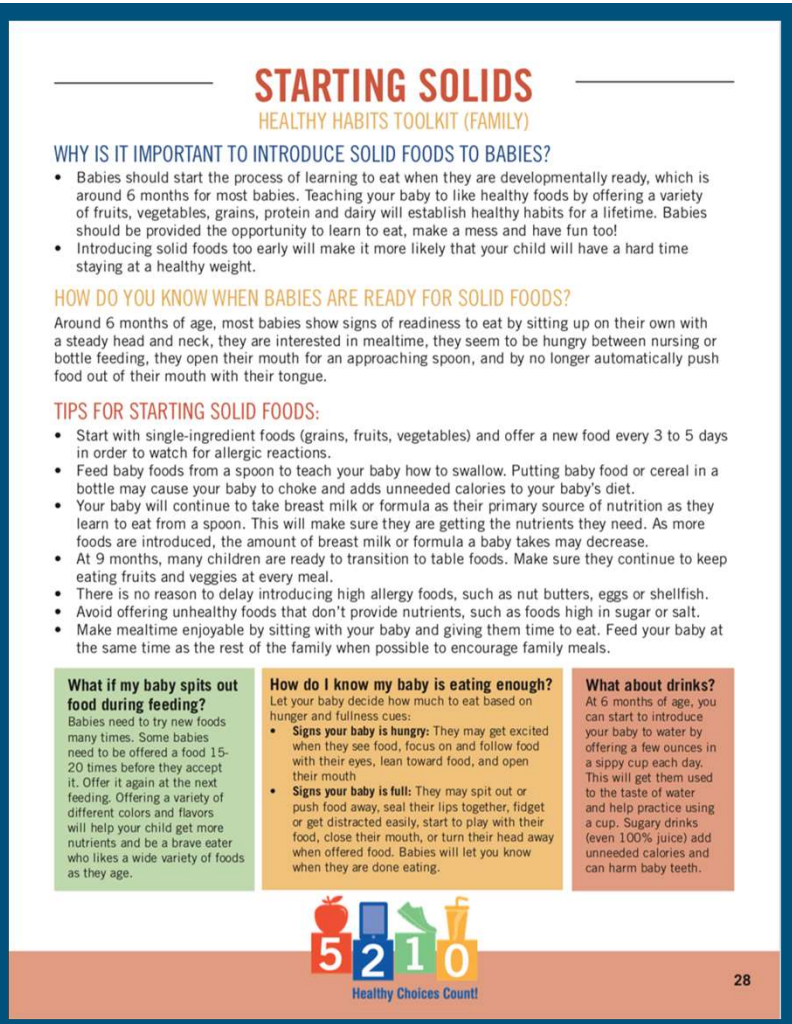
Tips for starting-pace/type/amount

Transition to table foods

May need to offer 15-20 times

Hunger and fullness cues

Healthy drink choices



STARTING SOLIDS

HEALTHY HABITS TOOLKIT (FAMILY)

WHY IS IT IMPORTANT TO INTRODUCE SOLID FOODS TO BABIES?

- Babies should start the process of learning to eat when they are developmentally ready, which is around 6 months for most babies. Teaching your baby to like healthy foods by offering a variety of fruits, vegetables, grains, protein and dairy will establish healthy habits for a lifetime. Babies should be provided the opportunity to learn to eat, make a mess and have fun too!
- Introducing solid foods too early will make it more likely that your child will have a hard time staying at a healthy weight.

HOW DO YOU KNOW WHEN BABIES ARE READY FOR SOLID FOODS?

Around 6 months of age, most babies show signs of readiness to eat by sitting up on their own with a steady head and neck, they are interested in mealtime, they seem to be hungry between nursing or bottle feeding, they open their mouth for an approaching spoon, and by no longer automatically push food out of their mouth with their tongue.

TIPS FOR STARTING SOLID FOODS:

- Start with single-ingredient foods (grains, fruits, vegetables) and offer a new food every 3 to 5 days in order to watch for allergic reactions.
- Feed baby foods from a spoon to teach your baby how to swallow. Putting baby food or cereal in a bottle may cause your baby to choke and adds unneeded calories to your baby's diet.
- Your baby will continue to take breast milk or formula as their primary source of nutrition as they learn to eat from a spoon. This will make sure they are getting the nutrients they need. As more foods are introduced, the amount of breast milk or formula a baby takes may decrease.
- At 9 months, many children are ready to transition to table foods. Make sure they continue to keep eating fruits and veggies at every meal.
- There is no reason to delay introducing high allergy foods, such as nut butters, eggs or shellfish.
- Avoid offering unhealthy foods that don't provide nutrients, such as foods high in sugar or salt.
- Make mealtime enjoyable by sitting with your baby and giving them time to eat. Feed your baby at the same time as the rest of the family when possible to encourage family meals.

What if my baby spits out food during feeding?
Babies need to try new foods many times. Some babies need to be offered a food 15-20 times before they accept it. Offer it again at the next feeding. Offering a variety of different colors and flavors will help your child get more nutrients and be a brave eater who likes a wide variety of foods as they age.

How do I know my baby is eating enough?
Let your baby decide how much to eat based on hunger and fullness cues:

- **Signs your baby is hungry:** They may get excited when they see food, focus on and follow food with their eyes, lean toward food, and open their mouth
- **Signs your baby is full:** They may spit out or push food away, seal their lips together, fidget or get distracted easily, start to play with their food, close their mouth, or turn their head away when offered food. Babies will let you know when they are done eating.

What about drinks?
At 6 months of age, you can start to introduce your baby to water by offering a few ounces in a sippy cup each day. This will get them used to the taste of water and help practice using a cup. Sugary drinks (even 100% juice) add unneeded calories and can harm baby teeth.

5 2 1 0
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AAP Tips for Starting Solid Foods Video

https://www.healthychildren.org/English/ages-stages/baby/feeding-nutrition/Pages/Tips-for-Introducing-Solid-Foods.aspx

6 month visit

				
-Meal Time -Introduction of solids -Importance of Variety -Responsive feedings Serving Sizes -Family as role models	-No screen media except video chatting until 18 mo -Introduce Screen Free Zones-bedtime, mealtimes, child-parent play times	-Encourage unrestricted movement -Discuss confining equipment- car seats, swings, bouncy seats, exersaucers, strollers -Family as Role Models	-No Juice -Introduce water -Support Breastfeeding-Critical Transition Periods 4)Self-weaning &/or maternal cessation	-Sleep hygiene

9 month visit

				
--F&V at every meal and snack -Transition to Table foods -Avoid non-nutritive finger/snack food -Importance of Variety and responsive feedings -Serving Sizes	-No screen media except video chatting until 18 mo -Introduce Screen Free Zones-bedtime, mealtimes, child-parent play times	-Encourage unrestricted movement -Discuss confining equipment- car seats, swings, bouncy seats, exersaucers, strollers	-No Juice/Soda/Fruit Drinks -No milk until 1 year -Introduce water -Support Breastfeeding- Critical Transition Periods 4)Self-weaning &/or maternal cessation	-Sleep hygiene -Family as role models -Do Not reward with food -Feeding -Division of responsibility

12/15 month visit

				
--F&V at every meal and snack -All Table Foods -Avoid non-nutritive finger/snack food -Importance of Variety -Serving Sizes -Feeding -Division of responsibility	-No screen media except video chatting until 18 mo -Limit background TV -Introduce Screen Free Zones-bedtime, mealtimes, child-parent play times	-30 min of structured activity -At least 60 minutes of unstructured play -Decreasing stroller use and increased walking on outing.	-No Juice/Fruit Drinks/Soda -Milk with meals-unflavored whole -Continued breast feeding	-Sleep hygiene: Toddlers between 12-36 months should sleep 12-14 hours in a 24 hour period. -Family as role models -Do Not reward with food

18 month visit

				
--F&V at every meal and snack -All Table Foods -Avoid non-nutritive finger/snack food -Importance of Variety/Picky Eaters -Serving Sizes -Feeding -Division of responsibility	-If choose to introduce media use it together /high quality programming -Limit background TV/market exposure -Continue Screen Free Zones and 1 hour prior to bedtime screen free	-30 min of structured activity -At least 60 minutes of unstructured play -Decreasing stroller use and increased walking on outing.	-No Juice/Fruit Drinks/Soda -Milk with meals-unflavored whole -Transition to low fat milk at 2 years	-Sleep hygiene: Toddlers between 12-36 months should sleep 12-14 hours in a 24 hour period. -Family as role models -Do Not reward with food

Feeding Toddlers

Recommendations

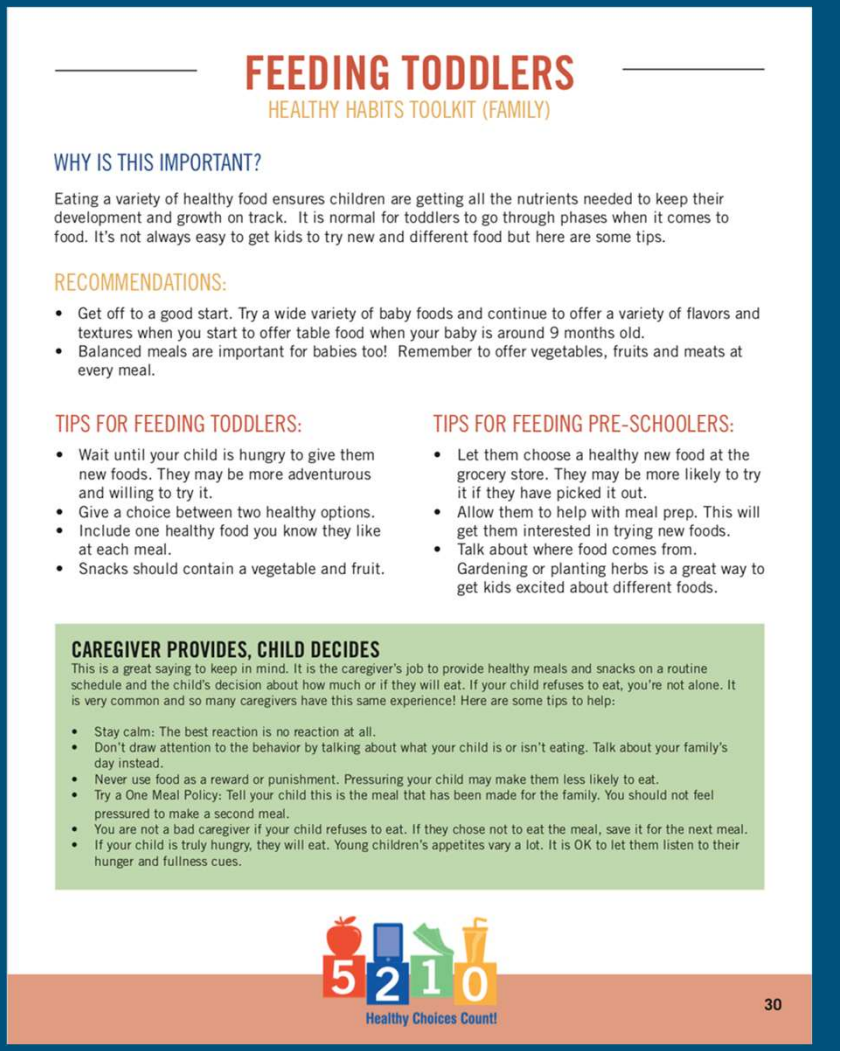
Role model

Offer choices

Snacks

Caregiver provides, child decides

Tips for tantrums



FEEDING TODDLERS

HEALTHY HABITS TOOLKIT (FAMILY)

WHY IS THIS IMPORTANT?

Eating a variety of healthy food ensures children are getting all the nutrients needed to keep their development and growth on track. It is normal for toddlers to go through phases when it comes to food. It's not always easy to get kids to try new and different food but here are some tips.

RECOMMENDATIONS:

- Get off to a good start. Try a wide variety of baby foods and continue to offer a variety of flavors and textures when you start to offer table food when your baby is around 9 months old.
- Balanced meals are important for babies too! Remember to offer vegetables, fruits and meats at every meal.

TIPS FOR FEEDING TODDLERS:

- Wait until your child is hungry to give them new foods. They may be more adventurous and willing to try it.
- Give a choice between two healthy options.
- Include one healthy food you know they like at each meal.
- Snacks should contain a vegetable and fruit.

TIPS FOR FEEDING PRE-SCHOOLERS:

- Let them choose a healthy new food at the grocery store. They may be more likely to try it if they have picked it out.
- Allow them to help with meal prep. This will get them interested in trying new foods.
- Talk about where food comes from. Gardening or planting herbs is a great way to get kids excited about different foods.

CAREGIVER PROVIDES, CHILD DECIDES

This is a great saying to keep in mind. It is the caregiver's job to provide healthy meals and snacks on a routine schedule and the child's decision about how much or if they will eat. If your child refuses to eat, you're not alone. It is very common and so many caregivers have this same experience! Here are some tips to help:

- Stay calm: The best reaction is no reaction at all.
- Don't draw attention to the behavior by talking about what your child is or isn't eating. Talk about your family's day instead.
- Never use food as a reward or punishment. Pressuring your child may make them less likely to eat.
- Try a One Meal Policy: Tell your child this is the meal that has been made for the family. You should not feel pressured to make a second meal.
- You are not a bad caregiver if your child refuses to eat. If they chose not to eat the meal, save it for the next meal.
- If your child is truly hungry, they will eat. Young children's appetites vary a lot. It is OK to let them listen to their hunger and fullness cues.

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AAP Tips for Feeding Picky Eaters Video

https://www.healthychildren.org/English/healthy-living/nutrition/Pages/Picky-Eaters.aspx

Toddler Tips

Food For Thought: 1st Five Nutrition Series - The 4Ws o...

https://www.youtube.com/watch?v=h7Oah6x2PCI&t=7s

Food For Thought: 1st Five Nutrition Series - Steps to...

https://www.youtube.com/watch?v=QMPsmnwA5RA&t=7s

Additional Topics

FAMILY MEALS

HEALTHY HABITS TOOLKIT (FAMILY)

WHY ARE FAMILY MEALS IMPORTANT?

Eating meals together as a family is important for your child's overall health. Children who eat with their families are more likely to eat fruits, veggies, and whole grains. Family meals give parents time to be role models for healthy eating. Sharing meals as a family also gives families a time to talk with each other.

WHY IS EATING AT HOME IMPORTANT?

Meals eaten at home are often healthier than meals eaten while dining out. Meals eaten while dining out often have more sodium and unhealthy fats, as well as larger portion sizes, than what we need to eat.

TIPS FOR EATING HEALTHIER TOGETHER

Eat More Meals Together at Home
Set a goal to eat family meals each week. Making meals as a family helps your child learn about the food they eat and how to make healthy choices.

Plan and Make Meals Ahead of Time
To save time, pick one day a week to make main dishes ahead of time. On the day of the meal, add sides like veggies, fruits, and whole grains.

Change as a Family
Change is easier when the whole family takes part. Family dinners are a time for parents to act as role models and teach healthy eating habits. Eat the foods you want your child to eat and be willing to try new foods so your child might try them, too.

Focus on the Meal
Family meals are a great time to talk and grow as a family. Help your child focus on the meal by having a no cell phone and no TV rule at the table.

Make Healthy Choices Away From Home
When dining out, look for meals with fruits and veggies. Try sharing a main dish with a family member for smaller portions. Choose drinks without added sugar like water, fat-free or low-fat milk, or unsweetened tea.

QUICK TIPS:

Parents and caregivers decide:
- What the food choices are
- When meals are served
- Where meals are eaten

Children decide:
- If and how much to eat of what's offered

5 2 1 0 Healthy Choices Count!

FRUITS & VEGETABLES

HEALTHY HABITS TOOLKIT (FAMILY)

WHY ARE FRUITS AND VEGGIES IMPORTANT?

What we eat matters for our bodies. Fruits and veggies have lots of nutrition and different colors of fruits and veggies have different vitamins and minerals. Healthy eating styles that include fruits and veggies can help prevent diseases like type 2 diabetes, cancer, and heart disease.

HOW MANY FRUITS AND VEGGIES SHOULD WE EAT?

EAT **5** OR MORE FRUITS AND VEGGIES EVERY DAY!

WHAT IS ONE SERVING?

Kids: Size of the palm of their hand

Adults:
Whole fruit: Size of a tennis ball
Chopped fruits or veggies: ½ cup
Dried fruit: ¼ cup
Leafy greens: 1 cup

TIPS FOR EATING MORE FRUITS AND VEGGIES

- Keep a bowl of whole fruit on the table, counter, or in the fridge.
- Buy fresh fruits and veggies in season when they may cost less and have the best flavor.
- Buy fruits that are dried, frozen, and canned (in water or 100% juice) as well as fresh.
- Stock up on frozen veggies for quick and easy cooking in the microwave.
- Buy packages of veggies such as baby carrots or celery sticks for quick snacks.
- Try herbs or seasonings on veggies to add flavor, and try different ways of cooking like roasting, boiling, or just eating them raw.
- Try pre-cut packages of fruit (such as melon or pineapple chunks) for a healthy snack in seconds.
- Let children decide on the veggies at meals or what goes into salads.
- Children can help shop for and prepare fruits and veggies – they are more likely to try something they helped make.
- Offer new fruits and veggies over and over again – it can take many times of seeing or trying before a child may like them.

QUICK TIP:

Making half your plate fruits and veggies can help you eat 5 or more servings of fruits and veggies a day!

5 2 1 0 Healthy Choices Count!

HEALTHY DRINK CHOICES

HEALTHY HABITS TOOLKIT (FAMILY)

WHAT SHOULD OUR FAMILY BE DRINKING?

Water and milk are the best drink choices for healthy lifestyles. Water is important for lots of things our bodies do, like keeping a normal temperature and breaking down the food we eat so the body can use it. Most of the body is made up of water – 60-75%! Milk has calcium that is important for healthy growth and making strong bones.

WHAT ARE SUGAR-SWEETENED DRINKS?

Sugar-sweetened drinks include any drinks that have sugar. The most common are juice, soda pop, sports drinks, energy drinks, flavored milks, and sweet teas. It is recommended that children have 0 sugar-sweetened drinks each day.

WHAT ABOUT JUICE?

Even though 100% fruit juice has some nutrients, it also has more sugar than your child needs. Choose whole fruits instead because they have fiber. Too much juice can also be harmful for children's teeth. If you choose to serve juice, choose 100% fruit juice and limit to 4-6oz a day for 1-6 year olds and 8-12oz a day for children 7 years and older.

HEALTHY DRINK CHOICES:
- Drink water most often
- Drink 2-3 cups of milk per day (or have other dairy choices)
- Try for 0 sugary drinks per day

TIPS FOR MAKING HEALTHIER DRINK CHOICES

- Cut down on sugary drinks in steps. Make daily and weekly goals. Once your family reaches one goal, move to the next goal.
- For flavored water, try adding lemon, lime, or orange wedges to water. Try mixing seltzer water with a splash of juice.
- Keep water and milk available to drink at home. Fill a pitcher of water and keep it in the fridge. Children are less likely to drink soda pop or other sugary drinks if they're not at home.
- Change as a family. Be a role model by choosing water instead of sugary drinks.
- For toddler age 1-2, choose whole milk. Women and children over age 2 should choose low-fat or fat-free milk most often. If you choose to serve chocolate milk, make it at home by adding a dash of chocolate syrup.

HOW MUCH SUGAR IS IN MY DRINK?

Beverage	Serving Size (oz)	Grams of Sugar
Water	8	0
Lipton Lemon Iced Tea	8	15
Hawaiian Punch	8	17
100% Orange Juice	8	20
Chocolate Milk	8	29
Cola	12	39

SERVING SIZE MATTERS

Sugar in typical fast food cola drinks:

5 2 1 0 Healthy Choices Count!

Additional Topics

SCREEN TIME

HEALTHY HABITS TOOLKIT (FAMILY)

WHAT IS SCREEN TIME?

Screen time includes time spent using the TV, computers, video games, tablets, and cell phones. Recreational screen time is any time spent with screens that is not for education or schoolwork.

HOW MUCH SCREEN TIME SHOULD MY CHILD HAVE EVERY DAY?

It is recommended to limit recreational screen time to no more than 2 hours per day for children 2 years of age and older, and no screen time for children under the age of 2.

WHY IS IT IMPORTANT TO LIMIT SCREEN TIME?

Screen time often replaces physical activity and can lead to more snacking. Too much TV can lower reading scores and cause attention problems. Limiting screen time can improve a child's health.

TIPS FOR MAKING HEALTHIER SCREEN TIME CHOICES

Set a Screen Time Schedule
Plan out screen time for each day with your child. Stick to the schedule and do not have the TV on while doing other activities. Try using a timer – when the bell rings, it is time to turn off the screens. To create your family media plan, visit: www.healthychildren.org/mediauseplan

Pay Attention to the Content
Choose age-appropriate programs. Avoid commercials by watching recorded shows, using DVDs, or streaming shows online commercial-free.

Don't Mix TV and Food
Avoid eating while watching TV, which can lead to eating too much. To promote healthy eating habits, eat meals together as a family and turn off the TV and cell phones.

Keep the Bedroom Screen-Free
Don't allow screens in your child's bedroom. Getting enough sleep is very important for your child's health. Kids with a TV in their bedroom get less sleep every night, which can lead to unhealthy weight gain.

Play Instead!
Instead of watching TV, play together as a family. Whether you are playing inside or outside, do your favorite family activity together. Play a board game, build a puzzle, go on a family bike ride, or play at a local park.

POINTS TO REMEMBER:

- Limit screen time to less than 2 hours a day.
- Avoid eating food while watching TV, or while playing on a computer or cell phone.
- Have screen-free zones in your home, including the dining room and your child's bedroom.
- Instead of screen time, play together as a family.

5 2 1 0 Healthy Choices Count!

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PHYSICAL ACTIVITY

HEALTHY HABITS TOOLKIT (FAMILY)

WHY IS PHYSICAL ACTIVITY IMPORTANT?

Physical activity helps children keep their heart and lungs healthy, and makes their bones and muscles stronger. Children that are active tend to be healthier, which can also make them better learners. Activity can help reduce stress and help children feel good about themselves. Being active also helps prevent diseases like type 2 diabetes, heart disease, and cancer.

HOW MUCH PHYSICAL ACTIVITY DOES MY CHILD NEED?

For 2 to 5 Year Olds
At least 1 hour of play and physical activity every day. Keep activity fun!

For 6 to 17 Year Olds
At least 1 hour of physical activity every day. Most of the hour should be moderate to vigorous activity. These are activities that make your child sweat or breathe hard, like fast walking, running, swimming, bicycling, dancing or playing basketball.

Also try activities that help build muscles and bones 3 days per week. To strengthen muscles, try monkey bars, push-ups, tug of war, and climbing trees. To strengthen bones, try jumping rope, running, and playing volleyball and basketball.

QUICK TIPS:

If you don't have time
Make activity part of your day. Take the stairs more often or walk around the store before shopping. Activity can be done for even 10 minutes at a time.

If your child doesn't like sports
Help your child to try other activities like dancing, bicycling, swimming and walking. Do volunteer work or find a friend to be an "activity buddy."

If you can't be outside
Stay inside and dance to music or make games with active toys like balls, hula hoops, and jump ropes. Go to a rec center or fit in activity at school.

PARENTS - JOIN THE FUN!

- Play with your child at home
- Go for walks as a family
- Help your child sign up for a sport or dance team
- Teach your child about your favorite activities

5 2 1 0 Healthy Choices Count!

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SLEEP

HEALTHY HABITS TOOLKIT (FAMILY)

WHY IS SLEEP IMPORTANT?

The amount of rest we give our bodies at night is very important for our health. Sleep is needed to maintain our body's daily activities. Getting enough sleep helps children do better in school and be more physically active. Not getting enough sleep can also affect eating habits, and lead to eating more than needed during the day.

TIPS FOR GETTING A GOOD NIGHT'S SLEEP

Keep a Regular Sleep Schedule
Decide on a bedtime for your child and stick to it every night. Keeping a routine will help your child fall asleep and stay asleep. Have your child wake up at the same time every morning, even on the weekends.

Make the Bedroom a Great Place to Sleep
Keep screens (like TVs and cell phones) out of the bedroom. Use soothing sounds like soft music. Dim lights as it gets closer to bedtime and brighten lights in the morning to help tell the brain when to sleep and when to wake up.

Follow the Same Bedtime Routine
Set up a routine to help your child slow down and relax before bed. Avoid TV and other screen time at least one hour before bedtime. Skip caffeine, too!

Daily Activities Affect Sleep
Getting more physical activity during the day can help your child go to sleep on time. If your child is having a hard time falling asleep, try playing outside more during the day.

Use Naps to Your Advantage, but Don't Overdo It
While naps can be important for getting enough sleep, too long of a nap can spoil bedtime. If your child is having a hard time falling asleep at night, cut back on naptime during the day.

HOW MUCH SLEEP DOES MY CHILD NEED?

Age	Sleep Needed in 24 Hours
Less than 6 months	16-20 hours
6-12 months	14-15 hours
1-3 years	10-13 hours
3-10 years	10-12 hours
11-12 years	Around 10 hours
13-17 years	Around 9 hours

A COMMON SLEEP DISORDER: SLEEP APNEA

Sleep apnea can prevent your child from getting quality sleep. Excess weight is a common cause of sleep apnea. It is important that sleep apnea is diagnosed and treated.

Watch for these signs of sleep apnea:

- Nighttime signs – snoring, restless sleep, mouth breathing, difficultly waking up in the morning even with the right amount of sleep.
- Daytime signs- hyperactivity, inattention, behavior problems, sleepiness, headaches.

If your child has any of these symptoms, talk to your pediatrician.

5 2 1 0 Healthy Choices Count!

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Additional Topics

HEALTHY EATING STYLES

HEALTHY HABITS TOOLKIT (FAMILY)

WHY IS A HEALTHY EATING STYLE IMPORTANT?

What we eat and drink matters for our bodies. A healthy eating style helps children grow, have energy to do well in school, and be physically active. Healthy eating styles can also help prevent diseases like type 2 diabetes, cancer, and heart disease.

WHAT SHOULD MY FAMILY EAT?

- **Make half your plate fruits and veggies.** Try apples, bananas, pears, grapes, strawberries, broccoli, green beans, tomatoes, carrots, bell peppers or spinach.
- **Make half your grains whole grains.** Try brown rice, oatmeal, whole wheat bread or tortillas, cornmeal, or quinoa.
- **Vary your protein routine.** Try seafood, beans and peas, nuts and seeds, soy foods, eggs, and lean meat.
- **Move to low-fat or fat-free milk or yogurt.** Try low-fat or fat-free milk, yogurt, cottage cheese, and soy milk.

QUICK TIP:

Use MyPlate and the Nutrition Facts Label Together

- **Step 1:** Choose types of food using the MyPlate food groups.
  - Example: Whole wheat bread (grains group)
- **Step 2:** Use the Nutrition Facts Label to choose between foods in the same group.
  - Example: Choose whole wheat bread with 3g of fiber per serving instead of bread with 1g of fiber per serving

USE NUTRITION LABELS TO MAKE HEALTHIER CHOICES

- **Limit saturated and trans fat**
  - Choose foods with less saturated fat
- **Limit sodium**
  - Limit sodium to 2,300 mg per day
- **Increase fiber in diet**
  - Good sources of fiber have at least 3 grams per serving, and excellent sources have 5 grams or more per serving
- **Limit sugar/added sugar in diet**
  - Limit added sugar to 25 grams or less per day
  - Look for added sugars in the ingredient list – brown sugar, dextrose, fructose, glucose, high fructose corn syrup, honey, lactose, malt syrup, molasses, and sucrose. The higher on the ingredient list, the more added sugar in the food
- **Get enough vitamins and minerals**
  - A food is high in vitamins and minerals if it has a daily value of 20% or more, and low if it has 5% or less
- **Ingredients: Look for "whole grain" and "whole wheat" carbohydrates**

5 2 1 0 Healthy Choices Count!

PORTION SIZES

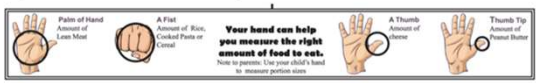
HEALTHY HABITS TOOLKIT (FAMILY)

WHY ARE PORTION SIZES IMPORTANT?

Portion sizes, especially when dining out, are often larger than what we really need. Starting with smaller portion sizes and paying attention to hunger and fullness signals can help us eat the amount of food we need.

LET YOUR HAND BE YOUR GUIDE

Use your child's hand to estimate their servings.



TIPS FOR HEALTHY PORTIONS

- Start with one serving on your child's plate – if they're still hungry they can have more.
- For second servings, start with fruits and vegetables.
- Serve food on smaller plates.
- Help your child eat snacks from a plate or a bowl instead of from the box or package.
- Skip the "clean plate club" - allow your child to leave food on their plate if they are full.

QUICK TIP: AM I HUNGRY?

Help your child learn to listen to when his/her body needs to eat and when it has had enough to eat by using this hunger and fullness scale. Rate hunger and fullness on a scale of 1 to 10 before and during a meal or snack. The goal is to start eating when feeling around a 3 or 4, and stop eating when feeling around a 5 or 6.

1	2	3	4	5	6	7	8	9	10
Starving, feeling dizzy	Very hungry, low energy, bad mood	Pretty hungry, stomach starting to growl	Starting to feel hungry	Satisfied, not hungry or full	Stomach slightly full	Stomach slightly uncom-fortable	Stomach feeling stuffed	Stomach very uncom-fortable	Stomach extremely full, feeling sick

5 2 1 0 Healthy Choices Count!

BREAKFAST & REGULAR MEALS

HEALTHY HABITS TOOLKIT (FAMILY)

WHY IS BREAKFAST IMPORTANT?

A healthy breakfast gives your child the nutrition their body needs to start the day. Children who eat breakfast are more likely to do well in school, have an overall better mood, eat healthier during the day, and have a healthy weight.

WHY IS IT IMPORTANT TO EAT THREE MEALS A DAY?

Eating breakfast, lunch, and dinner gives the body the energy and nutrition it needs during the day. Skipping meals can actually cause your child to eat more than needed during the day.

WHAT MAKES A WELL-BALANCED BREAKFAST?

Try to have at least 2 different food groups as part of your child's breakfast. Here are a few ideas to try at home!

Protein	Eat a variety of protein foods such as scrambled eggs, nuts or peanut butter. Dairy foods like milk and yogurt also have protein.
Grains	Whole-grain cereal or oatmeal are healthy grains that can be eaten with fruit for a well balanced breakfast.
Fruits	Include fresh fruit like a banana, apple, or berries.
Vegetables	Add vegetables like bell peppers and spinach to your scrambled eggs. Try spinach or kale in smoothies.
Milk	Have a glass of low-fat or fat-free milk, or a serving of yogurt.

TIPS FOR ENCOURAGING YOUR CHILD TO EAT REGULAR MEALS

If Your Child isn't Hungry in the Morning
To start the healthy habit of eating breakfast every morning, make changes in steps. Start off with a glass of milk every morning. Next, add whole-grain cereal. Finally, add fruit for a balanced breakfast.

If Your Child isn't Interested in Eating Breakfast
Encourage him/her to help you make breakfast in the morning; preparing breakfast together can be a fun part of your morning routine.

If there's no Time in the Morning for Breakfast
Choose healthy breakfast options that your child can eat on the go that require no or little preparation: dry cereal, fresh fruit, cup of yogurt, or a hard-boiled egg.

If Your Child isn't Hungry for Lunch or Dinner
If your child has snacks between meals, try smaller snack portion sizes or fewer snacks between meals overall. Limit or avoid snacks after dinner to encourage your child to eat when dinner is served.

5 2 1 0 Healthy Choices Count!

Coding and Billing Tips

- Provider can bill based on time spent 99213 / 99214
- Billable diagnoses: Obesity, Abnormal Weight Gain, Comorbidities
- “During this visit, greater than 50% of the 15/25 minutes for this appointment was spent counseling and or coordinating care utilizing motivational interviewing and brief action planning to guide the family through goal setting for this patient.”

https://www.iowamedical.org/5-2-1-0-Home-Page

Title V MCAH Program

Stephanie Trusty, RN, BSN
Iowa Dept. of Public Health-Bureau of Family Health-Nurse Clinician
stephanie.trusty@idph.iowa.gov

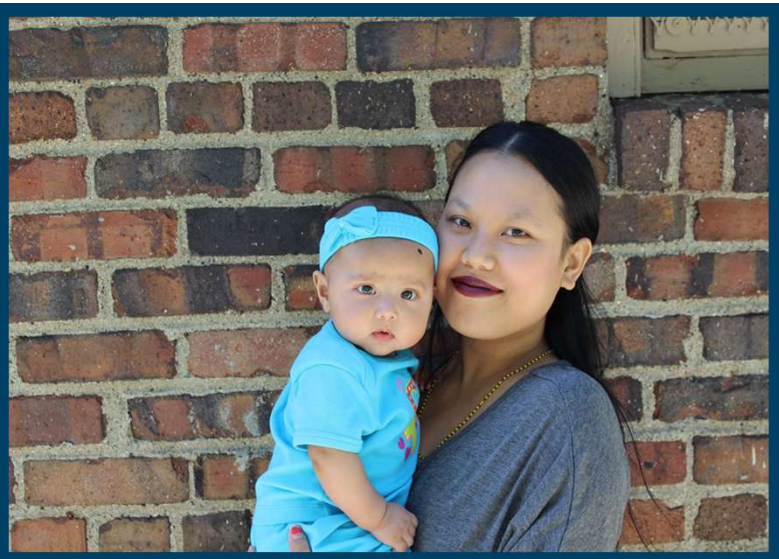
IDPH
IOWA Department of PUBLIC HEALTH

What is Title V Block Grant program?

Title V programs in Iowa are statewide, community based health promotion and preventive health service programs for medicaid eligible and low income women and children one of the goals of the program is to improving birth outcomes and reducing infant mortality.

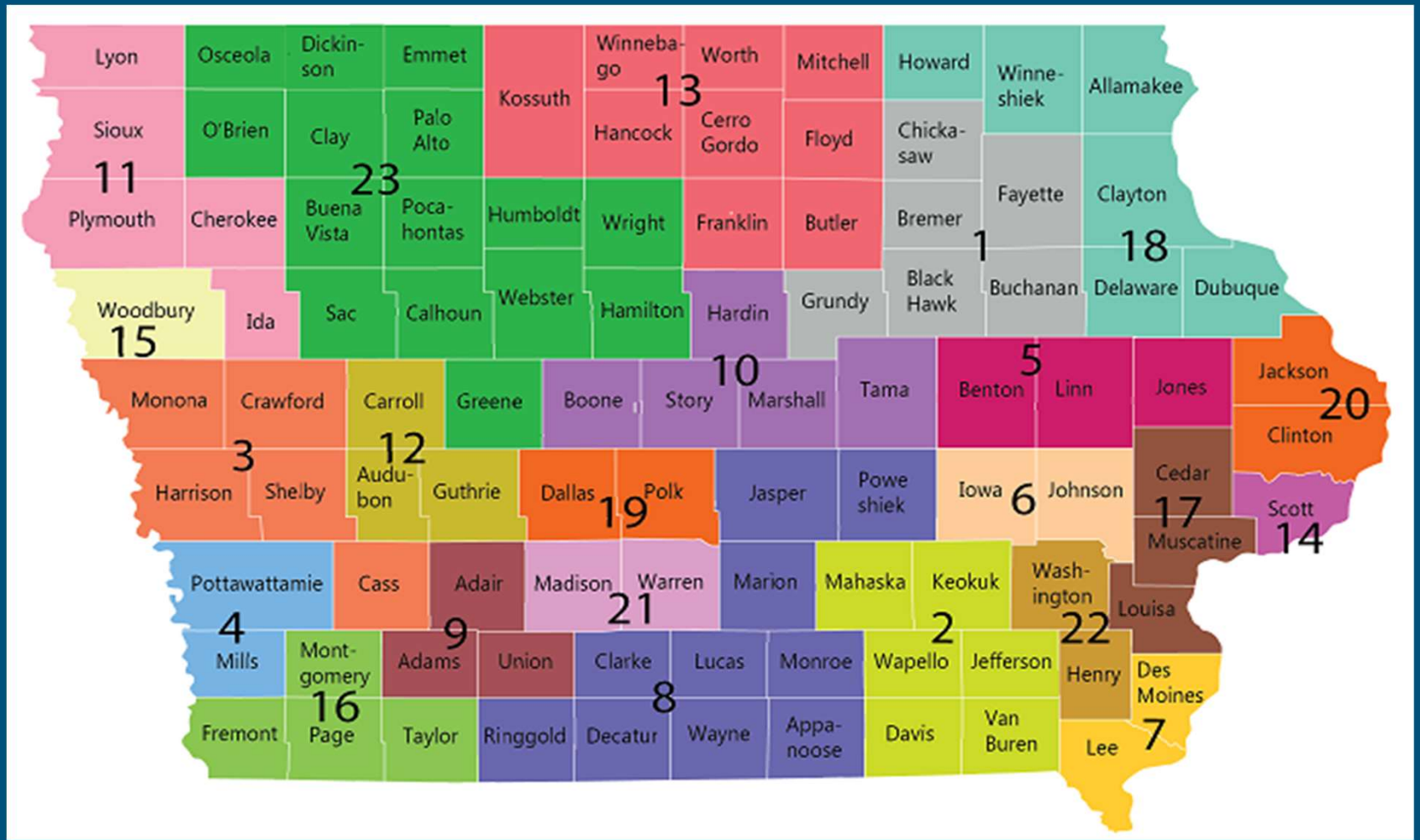
Federally funded by Health Resources & Services Administration (HRSA) and in place since 1935

There are 23 Title V Maternal Health agencies that serve Iowa's 99 counties.



Association of Maternal and Child Health Programs: http://www.amchp.org/AboutTitleV/Pages/default.aspx

IDPH Title V Maternal Health: https://idph.iowa.gov/family-health/maternal-health


Lyon
Osceola
Dickin-son
Emmet
Kossuth
Winneba-go
13
Worth
Mitchell
Howard
Winne-shiek
Allamakee
Sioux
11
O'Brien
Clay
23
Palo Alto
Hancock
Cerro Gordo
Floyd
Chicka-saw
Fayette
Clayton
18
Plymouth
Cherokee
Buena Vista
Poca-hontas
Humboldt
Wright
Franklin
Butler
Bremer
1
Black Hawk
Buchanan
Delaware
Dubuque
Woodbury
15
Ida
Sac
Calhoun
Webster
Hamilton
Hardin
10
Grundy
Monona
Crawford
Carroll
12
Greene
Boone
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Marshall
Tama
Benton
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Dallas
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Polk
Jasper
Powe shiek
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Johnson
Cedar
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Scott
14
Muscatine
Pottawattamie
4
Cass
Adair
9
Madison
Warren
21
Marion
Mahaska
Keokuk
2
Wash-ington
22
Louisa
Mills
Mont-gomery
16
Adams
Union
Clarke
8
Lucas
Monroe
Wapello
Jefferson
Henry
Des Moines
7
Fremont
Page
Taylor
Ringgold
Decatur
Wayne
Appa-noose
Davis
Van Buren
Lee

Title V Maternal Health Services

Helping women get insurance (Presumptive Medicaid Eligibility)

Care coordination - finding a doctor, dentist, mental health professional, other community resources, appointment reminders.

Health Screening (depression, domestic violence, alcohol, tobacco, other drugs)

Health Education by an RN

Assistance with transportation to medical/dental/mental health providers

Home visit by an RN

Title V Maternal Health Services

Nutrition counseling by a licensed dietitian

Psychosocial Services by an RN or social worker

Home visit by a social worker

Oral Health services including dental screening, dental treatment through referral to a Dentist, oral health education, application of fluoride varnish.

Title V Child Health Services

Informing families of newly Medicaid enrolled children about regular preventive health care

Assist families to establish Medical and Dental Homes

Outreach for enrollment in Medicaid and Hawk-i

Access to preventive health care

Developmental Testing and referral

Oral health screening and prevention

Does eating well improve birth outcomes?

Diet quality in pregnancy is a strong determinant of maternal and infant health. Poor diet quality may result in micronutrient deficiencies that cause and increase risk for neural tube defects, preterm birth and infants born small for gestational age.

Reduced fruit and vegetable intake, along with increased consumption of fried food and food with a high calorie content, have been linked to excessive gestational weight gain, increased risk of diabetes in pregnancy, hypertension and complications at delivery.

Zero sugar sweetened beverages reduces tooth decay, gestational diabetes

Does moving more improve birth outcomes?

Helps to ease side effects of pregnancy such as constipation, tiredness, back pain and leg swelling

Reduces the risk of gestational diabetes and blood clots

Improves weight control

Implementing tool kit into Title V MCAH programs

Include as health education provided by RN - CPT code H1003

During an antepartum home visit by an RN - CPT code S9123

Provide as Nutrition education must be done by a dietitian - CPT code S9470

Iowa WIC Program

Nicole Newman, RD, LD, CLC
Iowa Dept. of Public Health- WIC Program
State WIC Breastfeeding Coordinator
nicole.newman@idph.iowa.gov

What is WIC?

WIC is the Special Supplemental Nutrition Program for Women, Infants, and Children

A Federal program administered by the United States Department of Agriculture (USDA) Food and Nutrition Services (FNS)

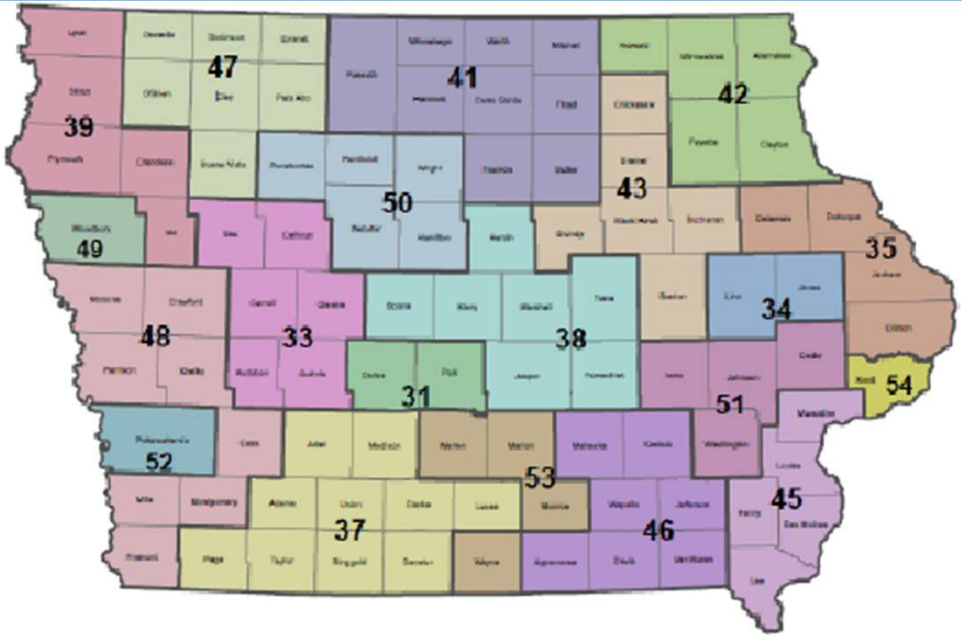
Iowa WIC

20 local WIC agencies

- Serving ~60,000 participants

Nationally:

- More than 50% of infants receive WIC
- 40% of women who give birth received WIC



31 Broadlawns Medical Center
33 New Opportunities, Inc.
34 Hawkeye Area Community Action Program
35 Hillcrest Family Services
37 MATURA Action Corporation
38 Mid-Iowa Community Action
39 Mid-Sioux Opportunity, Inc.
41 North Iowa Community Action
42 Visiting Nurse Association – Dubuque
43 Operation Threshold
45 Community Action of Southeast Iowa
46 American Home Finding
47 Upper Des Moines Opportunity, Inc.
48 West Central Community Action
49 Siouxland District Health Department
50 Webster County Health Department
51 Johnson County Public Health
52 Pottawattamie County
53 Marion County Public Health
54 Community Health Care, Inc.

What is WIC's mission?

WIC's mission:

To safeguard the health of low-income women, infants, and children up to age 5 who are at nutritional risk.

Who does WIC serve?

- Pregnant women
- Postpartum women up until 6 months postpartum
- Breastfeeding women up until 1 year postpartum
- Infants up until their 1st birthday
- Children up until their 5th birthday

WIC Eligibility Criteria

Residence in Iowa

At or below 185% of the Federal poverty level

Nutrition risk

WIC Benefits

Supplemental food package

Nutrition education, including breastfeeding promotion and support

Referrals to health care and other services

Breastfeeding Promotion and Support

WIC provides support via International Board Certified Lactation Consultants (IBCLC), Certified Lactation Counselors (CLC), Certified Lactation Specialists (CLS), dietitians, nurses, and Breastfeeding Peer Counselors

https://wicbreastfeeding.fns.usda.gov/

WIC Assessment and Education

During the certification process:

- Height/length and weight measured
- Blood test to screen for anemia
- Health and diet assessment
- Nutrition education
- Food package tailored for all
- Referrals as needed

Implementing the Toolkit in the WIC Clinic

- Nutrition education resources for dietitians and nurses
- Resource handouts for families
- Motivational interviewing tips and education
- Goal setting with clients

Questions?

Thank you!

A post-test and evaluation will be emailed following the webinar for certificates of attendance and continuing education for nurses and dietitians.

Post-Test: https://forms.gle/DccNJEmsuoLQMTY9A

Evaluation: https://forms.gle/EUdvL49n37XbpA1m7