After decades of increases, the obesity rates among low-income preschoolers declined slightly in 19 states and U.S. territories from 2008 through 2011, according to the August 2013 Vital Signs report from the Centers for Disease Control and Prevention. The report found that Florida, Georgia, Missouri, New Jersey, South Dakota and the U.S. Virgin Islands saw at least a one-percentage point decrease in their obesity rate. Twenty states, including Kentucky, held steady at their current rate, while obesity rates increased slightly in Colorado, Pennsylvania and Tennessee.

Previous research shows that about 12% of preschoolers are obese in the United States. Children are five times more likely to be overweight or obese as an adult if they are overweight or obese between three and five years of age.

Childcare providers, healthcare providers, communities and families can influence the health and nutrition of young children by:

- Making it easier for families to buy healthy, affordable foods in their neighborhoods;
- Helping childcare providers adopt best practices for improving nutrition and increasing physical activity; and
- Creating partnerships to make changes in the community that promote healthy eating and active living.

Healthcare providers should measure children's weight, height and body mass index routinely and counsel parents about nutrition and physical activity for their children. It is also important to connect families with community resources such as nutrition education and breastfeeding support services.

For more information, visit [www.cdc.gov/obesity/childhood](http://www.cdc.gov/obesity/childhood).
Kentucky has the prescription for significantly reducing childhood obesity. It is called 5-2-1-0.

- Five: Eat five or more servings of fruits and vegetables each day
- Two: Limit screen time to no more than two hours a day
- One: Be physically active at least one hour a day
- Zero: Don't drink sweetened beverages

The campaign is designed to give parents, health-care professionals and day care operators a memorable way to talk about the key evidence-based behaviors that reduce childhood obesity.

As part of its regular community services plan, the Calloway County Health Department did a 5-2-1-0 promotional event at Murray, Kentucky’s “Trails of Treats” in the county park on Halloween in 2012. Members of the staff wore costumes to represent the 5-2-1-0 concepts and handed out bags with mini Frisbees, fruit-scented bookmarks, nutrition/physical-activity stickers and a 5-2-1-0 brochure. Over 2,000 people attended the event.

If your local health department would like to include 5-2-1-0 in its upcoming community events, free resources are available for promotional and educational purposes. Downloadable resources include posters, brochures, activity ideas and coloring pages. You may obtain single copies of these materials from the 5-2-1-0 website at [http://chfs.ky.gov/dph/mch/hp/5210](http://chfs.ky.gov/dph/mch/hp/5210). Multiple copies of these resources, as well as prescription pads that can be shared with local health care professionals, may be ordered from the Pamphlet Library.
The WIC Program has been a longtime advocate for the health of its participants. It provides a food benefit package that is tailored to meet the unique nutritional needs of its population as well as a nutrition education benefit. Folic acid education and consumption of foods containing folic acid has been a focus of preventive care for the pregnant and breastfeeding mothers in Kentucky and in the WIC Program.

For women in their childbearing years, it is recommended to consume 400 micrograms (mcg) of folic acid daily. Folic Acid has been shown to reduce the risk of having a baby with neural tube defects. Since 50% of pregnancies are unplanned, it is important for these women to take a folic acid supplement every day.

When counseling pregnant, breastfeeding and post-partum women, continue to emphasize the importance of multivitamins or prenatal vitamins containing folic acid. You may also inform clients of some sources of folic acid available through the WIC food package.

Some cereals on Kentucky’s WIC Approved Food list provide as much as 50-100% of the daily value of folic acid per serving. The table below illustrates the percent Daily Value (DV) of folic acid (per serving) found in some of the approved cereals. WIC clients also have the option to utilize their eWIC Cash Value Benefit to purchase dark green leafy vegetables to help meet their need for folic acid. For example, 1/2 cup of boiled spinach contains approximately 33% of the daily value of folic acid.

Folic Acid handouts are available in the pamphlet library for ordering. The pamphlet number is PAM-ACH 29.
The state WIC office has made many changes to the Approved Food List that will take effect on October 1, 2013. The goal is to make WIC foods easier to find and to expand the food list to include a variety of choices to maximize nutritional impact. The changes are outlined below by food category. The new food lists are being printed and will be shipped to each agency when they are available. Additional food lists may be ordered from the pamphlet library.

<table>
<thead>
<tr>
<th>Food List Category</th>
<th>Changes for October 1, 2013</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cereal</td>
<td>• Updated cereal names</td>
</tr>
<tr>
<td></td>
<td>• Updated pictures to accurately represent each box</td>
</tr>
<tr>
<td></td>
<td><strong>Note:</strong> Although not indicated on this year’s food list, the labeling for Cheerios has changed and now qualifies as a whole grain cereal.</td>
</tr>
<tr>
<td>Juice</td>
<td>• No changes</td>
</tr>
<tr>
<td>Milk</td>
<td>• No changes</td>
</tr>
<tr>
<td>Cheese</td>
<td>• No changes</td>
</tr>
<tr>
<td>Tofu</td>
<td>• Tofu has been expanded to include 14 oz. package size due to limited availability of the 16 oz. package.</td>
</tr>
<tr>
<td></td>
<td>• The food list will read this year “8 or 14-16 oz. container”</td>
</tr>
<tr>
<td>Soy Milk</td>
<td>• Added Silk Soy Original</td>
</tr>
<tr>
<td></td>
<td>• Pictures have been added for each brand</td>
</tr>
<tr>
<td>Eggs</td>
<td>• No changes</td>
</tr>
<tr>
<td>Dried Beans or Dried Peas</td>
<td>• Added the explanation of “dried beans or dried peas”</td>
</tr>
<tr>
<td>Peanut Butter</td>
<td>• Added 16 oz. jar size of peanut butter to food list due to limited availability of the 18 oz. jar</td>
</tr>
<tr>
<td></td>
<td>• No Omega 3, flaxseed, or plus (indicates additional vitamins)</td>
</tr>
<tr>
<td>Canned Fish</td>
<td>• No changes</td>
</tr>
</tbody>
</table>

(Continued on page 5)
<table>
<thead>
<tr>
<th>Food List Category</th>
<th>Changes for October 1, 2013</th>
</tr>
</thead>
</table>
| Whole Grain Bread          | • Removed 12 oz. size  
• Additional 16 oz. and 24 oz. brands listed  
Removed (products do not meet nutrition requirements):  
• Healthy Life 100% Whole Grain Bread  
• Healthy Life 100% Whole Wheat (with flaxseed)  
Removed (were not purchased in the past 6 months):  
• Earth Grains 100% Whole Wheat (16 oz)  
• Harris Bread Company Slim and Trim Wheat (16 oz)  
• Ozark Hearth 100% Whole Wheat (16 oz)  
• Baker’s Inn Honey Wheat (24 oz)  
• Kroger Multigrain Double Protein (24 oz)  
• Wonder 100 Whole Wheat (24 oz) |
| Whole Grain Brown Rice     | • No changes                 |
| Whole Grain Tortillas      | Added:  
• Kroger Whole Wheat Tortilla  
• Pepito Corn Tortilla  
• Meijer Corn Tortilla  
Removed (products do not meet nutrition requirements):  
• Chi Chi’s  
• Mission Yellow Corn |
| Fresh Fruits & Vegetables  | • Added “yes organic” and “yes whole or cut” for clarification  
• Added “no frozen, canned, or pouches”  
• Sweet potato and yams are the only type of potato allowed |
| Infant Foods               | • Goya added  
• Pictures have been added for each brand  
• No pouches  
Removed (product not available):  
• Nature’s Goodness |
**Whole Grain Cereal Update**

WIC promotes whole grain consumption as a part of a healthy lifestyle. Federal Regulations require that half of the cereals on our WIC Approved Food List be whole grain. Whole grain products are denoted with the (*) symbol next to the cereals that meet the requirements for a whole grain product on the KY WIC Approved Food List and the Kentucky WIC Vendor Agreement.

Our office has recently reviewed the labeling for General Mills Toasted Grain Oat Cheerios (Cheerios in yellow box). This product now meets the requirement to be classified on the food list as a whole grain. Please note that neither the current nor the 2013-2014 KY Approved Food list or Kentucky WIC Vendor Agreement denotes General Mills Cheerios as a whole grain.

General Mills Cheerios is one of the cereals to be considered in meeting the whole grain cereal minimum stocking requirements.

If you have any questions, please contact Brittan Bibb, Clinical Nutrition Section or Stephanie Rawlings, Vendor Management Section at (502) 564-3827.

---

**Nutramigen Toddler Formula**

The WIC Program has received information from Mead Johnson Nutrition regarding a new formula. Nutramigen Toddler is intended for use with infants/toddlers age 9-36 months that require a formula for severe cow's milk allergies.

Nutramigen Toddler is an iron-fortified, hypoallergenic infant/toddler formula for the dietary management of older infants and toddlers with severe cow's milk protein allergy. Compared to Nutramigen Infant formula, Nutramigen Toddler formula provides increased calcium and vitamins to help meet the nutritional needs of older infants and toddlers.

The UPC code for Nutramigen Toddler has been updated in the WIC EBT system. The food package codes are in the system and are listed in the table below.

If you have questions, please contact the state WIC office at (502) 564-3827, extension 4350.

<table>
<thead>
<tr>
<th>Product Description</th>
<th>UPC Codes</th>
<th>Food Package Description—Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nutramigen with Enflora LGG Toddler (Nutramigen Toddler) 12.6 oz. Powder</td>
<td>Case: 300875107355&lt;br&gt;Unit: 300875107348</td>
<td>Infant Partially Breastfed- M74&lt;br&gt;Infant Full Formula Fed- MP10&lt;br&gt;Child Food Package III with milk- U12&lt;br&gt;Child Food Package III with Soy Milk- U18</td>
</tr>
</tbody>
</table>
WIC Policy & Procedure Training

The Program Management Section staff has developed a WIC Policy and Procedure PowerPoint training presentation which targets specific areas of information for support staff. Topics reviewed include: Income Eligibility, Determining Household Size, Income label, Zero income and using Statement of No Proof, Adjunct eligibility, Presumptive eligibility, Proof codes, Certification periods, VOC, Processing Standards and Food Instrument (FI) and eWIC card inventory.

This training has been provided to eight sites and two district agencies statewide. Positive survey results completed by the attendees have indicated that the training to be very informative.

If you would like more information or are interested in a training being provided to your staff, please contact Rita Hatcher at Rita.Hatcher@ky.gov or (606) 864-5187.

Vendor Management Section Update

The Vendor Management Section has worked very hard to revise all of its manuals and forms for fiscal year 2013 in accordance with current federal and state regulations. The updated versions of these forms and manuals can be found for both applying and contracted retail or drug store vendors by visiting the Cabinet website Vendor Management Section page http://chfs.ky.gov/dph/mch/Vendor+Management.htm under the heading “Retail” or “Drug Store”.

The annual state vendor training was successfully conducted at local health agencies throughout the state in the month of September. If stores in your area feel they are in need of additional training they may request it at any time by contacting our office in Frankfort by calling (502) 564-3827 and selecting option three (3), or toll free at (877) 597-0367.

We have received some excellent feedback from the vendors throughout the state expressing their satisfaction with the new eWIC cards. They feel it has reduced confusion at checkout for determining whether or not certain foods are approved. The new Kentucky WIC Approved Food List is also now available by visiting the website mentioned above under the “Retail” section.

The Vendor Management Section would like to congratulate Mr. Joe Wilson on his retirement effective July 31, 2013. We would like to thank Mr. Wilson for his many wonderful years of exemplary service to the WIC Program. Nutrition Service Branch Manager Fran Hawkins will serve as interim supervisor of our section until this position is filled.
FDA Issues New Rules on Gluten Labeling
On August 2, 2013, The U.S. Food and Drug Administra-
tion published a new regulation defining the term “gluten-free” for voluntary food labeling.

This new federal definition standardizes the meaning of “gluten-free” claims across the food industry. It requires that, in order to use the term “gluten-free” on its label, a food must meet all of the requirements of the definition, including that the food must contain less than 20 parts per million of gluten. The rule also requires foods with the claims “no gluten,” “free of gluten,” and “without gluten” to meet the definition for “gluten-free.”

The FDA recognizes that many foods currently labeled as “gluten-free” may already meet the new federal definition. Food manufacturers will have a year to bring their labels into compliance with the new requirements.

Visit www.fda.gov for more information.

America’s 50 Healthiest Counties for Kids
“America's 50 Healthiest Counties for Kids,” a new set of rankings by U.S. News & World Report, highlights counties that have fewer infant deaths, fewer low-birth-weight babies, fewer deaths from injuries, fewer teen births and fewer children in poverty.

View the rankings at health.usnews.com.

Family Health Centers in Louisville Featured in New York Times
The Family Health Centers in Louisville were featured in a June 22 New York Times story that examines the implementation of the Affordable Care Act and its effect on healthcare providers and local communities. Bill Wagner, Executive Director of Family Health Centers, was interviewed for the story and discussed their financial challenges and issues in recruiting staff while facing a potential doubling of their patient load when the law takes effect.


Lake Cumberland District Health Department Recognized

The Lake Cumberland District Health Department (LCDHD) was recently recognized by the National Diabetes Education Program (NDEP) with a “Partner Spotlight” for using NDEP resources to promote diabetes management messages in the community.

Each year, LCDHD develops a calendar for submitting articles to several local newspapers, which publish the articles for free. The monthly articles have a different theme each month. For example, NDEP’s article “Attention Men! Take Steps to Manage Your Diabetes for Life” was submitted in June in observance of National Men’s Health Week (June 10-16) and Father’s Day (June 16). The articles are tailored to appeal to a target audience and include contact information for LCDHD.

NDEP’s library of articles on a variety of diabetes management and prevention topics can be found at www.ndep.nih.gov. The NDEP website also includes a “What is NDEP Promoting this Quarter?” section with free resources that you can use to support your diabetes outreach activities.
State Indicator Report on Fruits and Vegetables
The State Indicator Report on Fruits and Vegetables, 2013 provides national and state-specific information on fruit and vegetable consumption and environmental supports. The report and additional materials are available at http://www.cdc.gov/nutrition/professionals/data.

The Community Guide
The Guide to Community Preventive Services, or The Community Guide, is a collection of all the findings and recommendations of the Community Preventive Services Task Force. The Community Guide is a free resource designed to help local health departments make decisions by providing information on:

- Which community preventive services, programs and policies have proven to be effective;
- How these programs, services and policies may fit the needs of a community; and
- What the estimated costs and potential returns on investment are.

The Community Guide includes findings and recommendations on health topics such as nutrition, obesity, diabetes and many more. The guide can be accessed at www.thecommunityguide.org.

Translating Evidence into Practice
Public health services and systems research (PHSSR) examines questions that relate to the financing, organization and delivery of public health services and how they translate to the health of the population.

The National Coordinating Center for Public Health Services and Systems Research and the Public Health Practice-Based Research Networks (PBRN) National Coordinating Center, both housed at the University of Kentucky, collaborate to explore the impact of specific public health strategies on the quality and performance of the United States public health system.

Dig In!
The United States Department of Agriculture (USDA) has developed Dig In!, a standards-based nutrition education curriculum for 5th and 6th grade students. The Dig In! curriculum consists of ten lessons that engage students in growing, harvesting, tasting and learning about fruits and vegetables. The curriculum includes:

- A Teacher’s Guide;
- A Gardening Guide;
- Dig In! At Home Parent Booklets;
- Dig In! Posters; and
- An Eat Smart to Play Hard With MyPlate Poster.

Schools participating in the National School Lunch Program or other child nutrition program may request a free print copy of the curriculum. The curriculum comes with 35 copies of the Dig In! At Home parent handout and six Dig In! posters. For more information or to download the materials visit http://teamnutrition.usda.gov/

Resources
Explore PHSSR, from research to results, by visiting www.publichealthsystems.org.

Kentucky Health Facts
Kentucky Health Facts is a website sponsored by the Foundation for a Healthy Kentucky. The aim of www.kentuckyhealthfacts.org is to provide access to key health data for Kentucky communities. Our hope is that communities will use these data to identify local needs, motivate change, guide planning efforts and take meaningful, positive action toward improved health.

Resources for additional regional, national and Kentucky-specific data can also be found at www.kentuckyhealthfacts.org/Resources.aspx
Kentucky Health Issues Poll (KHIP) Regional Results

The regional findings of the Kentucky Health Issues Poll (KHIP) are now available. The data are broken down into five regions: Eastern Kentucky, Greater Lexington, Greater Louisville, Northern Kentucky and Western Kentucky. Each regional report outlines respondents’ answers to various KHIP questions and then compares regional responses to statewide findings. The full report for each region can be found at www.healthy-ky.org. Key differences by region are outlined below.

**Western Kentucky**
Residents were less likely to have dental insurance and less likely to know someone who had experienced problems as a result of abusing prescription pain relievers.

**Greater Louisville**
Adults were more likely to have dental insurance and be concerned with air quality.

**Greater Lexington**
Adults were less likely to have been prescribed a pain reliever and less likely to change or limit their activities when they hear of an air quality alert being issued.

**Northern Kentucky**
Adults were less likely to have visited a dentist in the past year and less likely to have a favorable view of the Patient and Affordable Care Act.

**Eastern Kentucky**
Adults were more likely to rely on home remedies or over-the-counter drugs instead of going to the doctor and recognized that drug poisonings/overdoses were the leading cause of unintentional death in Kentucky.

Statewide KHIP results indicate that the majority of Kentucky adults favor a statewide smoke-free law, view health care costs as a financial burden, support integration of mental health and medical services, do not have dental insurance and say that they need more information about how the Patient Protection and Affordable Care Act will impact them personally.

Prevent Listeria Infection

Listeria can cause serious infection in certain vulnerable groups, resulting in higher rates of hospitalization and death than most bacteria commonly spread by contaminated food.

Adults aged 65 years and older are among the groups most affected; they are four times more likely to become infected with listeria than the general U.S. population. Pregnant women are 10 times more likely to be infected and pregnant Hispanic women are 24 times more likely. These groups—along with newborns and people with weakened immune systems—account for at least 90 percent of reported listeria infections.

The CDC recommends that no one consume unpasteurized milk or soft cheese made from unpasteurized milk. Soft cheeses can be crumbly, like queso fresco, or soft and spreadable. People at high risk for listeria infection should be aware that some Mexican-style soft cheeses, like queso fresco, made from pasteurized milk have caused listeria illnesses. High risk groups should always heat hot dogs and deli meat until steaming hot (165° F), and everyone should follow good food safety practices.

For more information on safely preparing and refrigerating foods prone to listeria contamination, please visit www.cdc.gov/listeria.
Infant Feeding Research

Brigham Young University sociology professors Ben Gibbs and Renata Forste found that clinical obesity at 24 months of age strongly traces back to infant feeding.

The BYU researchers analyzed data from more than 8,000 families and found that babies predominantly fed formula were 2.5 times more likely to become obese toddlers than babies who were breastfed for the first six months.

Putting babies to bed with a bottle increased the risk of childhood obesity by 36 percent. In addition, introducing solid foods before four months of age increased a child’s risk of obesity by 40 percent.

The researchers said that breastfeeding lends itself to helping babies recognize when they feel full and should stop. However, that same skill can be developed by formula-fed infants.

“You can still do things even if you are bottle feeding to help your child learn to regulate their eating practices and develop healthy patterns,” Forste said. “When a child is full and pushes away, stop! Don’t encourage them to finish the whole bottle.”


Continuing Education Resources

**WIC Learning Online**
WIC Learning Online is a series of online courses designed to train all levels of staff working in the WIC program. Course titles include:

- WIC 101;
- WIC Breastfeeding Basics;
- First Time Manager;
- Value Enhanced Nutrition Assessment;
- Feeding Infants: Nourishing Attitudes and Techniques;
- Communication with Participants;
- Counseling Skills; and
- Reaching Participants through WIC.

Visit WIC Learning Online at wicworks.nal.usda.gov/wic-learning-online.

**Dietetic Code of Ethics**
Did you know that all dietetic professionals must complete a code of ethics course? ContinuingEducation360.com offers a free course worth one CPEU for all dietetic professionals. For more information, visit www.continuingeducation360.com/Free-Ethics-Dietetics.html.

**Personalizing Patient Goals and Care in Type 2 Diabetes: One Size Does Not Fit All**
This unique online continuing education curriculum includes a blend of lectures, interviews and case study discussions that cover a variety of topics. Nurses and Dietitians can earn up to 5.5 free continuing education credits by utilizing these modules.

To access this series, sign up for an account at www.idoc.org/ada/intro.

**NutritionCME.org**
NutritionCME.org offers free online continuing education to health care professionals interested in using nutrition for health promotion and disease prevention. The continuing education offerings for Nurses, Registered Dietitians and Certified Diabetes Educators are approved by the George Washington School of Medicine and Health Sciences.

Continuing Education topics include: Cancer Prevention, Childhood Obesity, Diabetes Mellitus, General Nutrition and Weight Management.
Your WIC Contacts in Frankfort:

- **Branch Office**
  General questions regarding Nutrition Services and the WIC Program
  (502) 564-3827, Option 6

- **Program Management**
  Income Eligibility and Administrative Policy and Procedures
  (502) 564-3827, Option 5

- **Vendor Section**
  Vendor related questions and applications
  (502) 564-3827, Option 3

- **Food Delivery/Data Section**
  Help desk, stop pays, computer issue, auto-dialer, printer and printing problems
  (502) 564-3827, Option 1

- **Clinical Nutrition Section**
  Special formula approvals, breast pump rentals and nutrition education
  (502) 564-3827, Option 2

---

**Newsletter Contributors**

- Connie Howell, M.Ed, RD, LD  
  Nutrition Services Supervisor
- Nicole Nicholas, MS, RD, LD  
  Clinical Nutrition Supervisor
- Brittan Bibb, MS, RD, LD  
  Dietetic Educator
- Cindy Sullivan, MS, RD, LD  
  Dietetic Educator
- Misty Morris, MS, RD, LD  
  WIC Field Representative
- Stephanie Hays, Finance Administrator  
  Calloway County Health Department
- Rita Hatcher, Health Program Administrator  
  Program Management Section
- Michele Burton, RD, LD  
  Newsletter Editor

---

This institution is an equal opportunity provider.  
WIC is a registered service of the U.S. Department of Agriculture for USDA’s Special Supplemental Nutrition Program for Women, Infants and Children.