

Utah Nutrition Education Plan Goals and Objectives FY 2018 Breastfeeding

This Nutrition Education/Services Plan takes into consideration local agency plans, needs and resources and is designed to meet the following requirements:

7 CFR 246.11(b) – The State agency’s Nutrition Education/Services Plan must be designed to achieve two broad goals:

- a. Emphasize the relationship between nutrition, physical activity and health with special emphasis on the nutritional needs of pregnant, postpartum and breastfeeding women, infants and children under five years of age, and raise the awareness about the dangers of using drugs and other harmful substances during pregnancy and while breastfeeding
- b. Assist the individual who is at nutritional risk in improving health status and achieving a positive change in dietary and physical activity habits, and in the prevention of nutrition-related problems through optimal use of the supplemental foods and other nutritious foods. This is to be taught in the context of the ethnic, cultural and geographic preferences of the participants and with consideration for educational and environmental limitations experienced by the participants.

Goals	Objectives	Activities	Outcome
<p>1. Increase the number of mothers in the WIC population who breastfeed. * This Goal supports and promotes breastfeeding.</p> <p>(Healthy People 2020 Objectives) Increase the proportion of mothers who breastfeed their babies:</p> <ul style="list-style-type: none"> • Initiation 81.9% • 6 months 60.5% • 1 year 34% • 3 mo exclusively 44.3% • 6 mo exclusively 23.7% 	<p>1.1 During FY2018, breastfeeding initiation rates (“ever”) will be increased from the “ever” rate of 87.0% based on VISION reports generated for the 2017 calendar year for comparison.</p> <p>1.2 During FY2018, 6 month breastfeeding rates will be increased from rate of 37.0% based on VISION reports generated for the 2017 calendar year for comparison.</p> <p>1.3 During FY 2018, 1 year breastfeeding rates will be increased from the rate of 32.0% based on VISION reports generated for the 2017 calendar year for comparison.</p> <p>1.4 Baseline data of 3 month and 6 month exclusivity rates will be increased from 33% and 20%, respectively. VISION reports</p>	<p>1.1.1. Update State Breastfeeding policies and procedures to meet or exceed USDA regulation and to promote breastfeeding.</p> <p>1.1.2. All pregnant women will be screened and counseled regarding their interests and concerns about breastfeeding. All prenatal and postpartum visits will include breastfeeding counseling and messages</p> <p>1.1.3. All local agencies will be trained on <i>Using Loving Support to Grow and Glow: Training for Local WIC Staff</i> and will use state resources to train newly hired staff.</p> <p>1.1.4. USDA <i>Loving Support WIC Peer Counselor: A Journey Together Training Program</i></p>	<p>1.1.1 – 1.1.4 were accomplished</p> <p>1.1 The 2017 Vision BF Prevalence Report State Totals for Ever BF was maintained at 87%</p> <p>1.2 The 2017 Vision BF Prevalence Report State Totals for 6 months BF decreased by 1% to 36%.</p> <p>1.3 The 2017 Vision BF Prevalence Report State Totals for 1 year BF increased by 1% to 33%.</p> <p>1.4 The 2017 Vision BF Prevalence Report State Totals for exclusively BF for 3 months and 6 months are 32% (decreased) and 19% (decreased), respectively</p>

Goals	Objectives	Activities	Outcome
	will be generated for the 2017 calendar year for comparison.	will be offered, upon local agency need, and at least 2 times per year, as needed	
<p>2. Increase or maintain the number of IBCLCs working for local WIC agencies. Maintain or increase the number of State Dept of Health employees dedicated to breastfeeding FTEs. This Goal also supports and promotes breastfeeding.</p>	<p>2.1 “Up to date” breastfeeding resources will be available for staff.</p> <p>2.2 All local CPA staff will receive comprehensive breastfeeding training</p> <p>2.3 Work with other state health department agencies to incorporate breastfeeding policies, strategies, etc. into their programs.</p> <p>2.4 Maintain or increase the 2017 number of IBCLCs (19).</p> <p>2.5 Increase access and utilization of WIC Peer Counselors</p>	<p>2.1.1 Breastfeeding resources will be identified, purchased and distributed for staff use and training.</p> <p>2..2.1 Offer 45 Hour Lactation Comprehensive Training (on sight or online) for local agency staff <u>as budget allows</u>. Scheduled for 9/17.</p> <p>2.3.1 Work with Utah Dept. of Health PANO, HUB, Maternal and Infant Health Program, Cancer, Worksite Wellness, and MCH Block Grant, etc. with incorporating and further strengthening breastfeeding.</p> <p>2.3.2 Continue to collaborate with Utah Breastfeeding Coalition, Le Leche League of Utah, Hospitals, Baby Friendly Hospital University of Utah, and universities.</p> <p>2.3.3 Increase referrals to Utah WIC Program Peer Counseling Program</p>	<p>2.1 – 2.3 were accomplished</p> <p>Offered 45 Hour Lactation Comprehensive Training 9/18/17-9/22/17 in Salt Lake</p> <p>Scheduled another 45 Hour Lactation Comprehensive Training for August 2018</p> <p>2.3.1 Utah State WIC staff collaborate with all of these Programs and support the Utah Stepping Up for Babies breastfeeding friendly state designation.</p> <p>2.3.2 Utah State WIC staff function on the Board of the Utah Breastfeeding Coalition and support all Baby Friendly Hospital initiatives.</p> <p>2.3.3 Referrals: -2015: 10,191 -2016: 10,426 -2017: 10,757 Data from Referral Summary Report</p>

Utah Goals and Objectives FY 2018
Nutrition Education

Goals	Objectives	Activities	Outcome
<p>1. Reduce the prevalence of low hematocrit/ hemoglobin among children who participate in the Utah WIC Program.</p>	<p>1.1. During FY 2018, the percent of children who have low hematocrit/ hemoglobin will be maintained or reduced from the 2016 baseline level of 13.33% (2016 VISION Annual Report) VISION reports will be generated for the 2017 calendar year for comparison.</p>	<p>1.1.1 Screen all children > 12 months for low hematocrit/hemoglobin and counsel according to P&P criteria.</p> <p>1.1.2 Children who are determined to be at high risk for severe anemia will have a nutrition care plan documented in their file and be provided with appropriate WIC follow up and physician referral.</p> <p>1.1.3 Research new educational resources and share with local WIC staff</p>	<p>1.1 – 1.1.3 were accomplished Prevalence of low hemoglobin decreased slightly in 2017 to 13.14%</p>
<p>2. Reduce the percent of children in the Utah WIC Program who are overweight and at risk of overweight.</p>	<p>2.1 During FY 2018, the percent of children who are at risk of overweight and overweight will be maintained or reduced from the 2016 baseline levels: 114- 10.4% for children and 25.27% for infants 113-5.43%</p> <p>VISION reports will be generated for the 2017 calendar year for comparison.</p>	<p>2.1.1 Collaborate with the SNAC program (Food Stamps, EFNEP, and CNP) in an effort to provide consistent nutrition and physical activity education for WIC participants.</p> <p>2.1.2 All WIC participants who have been assigned nutrition risk factor 113 or 114 will be assisted in goal setting.</p> <p>2.1.3 SNAPEd and EFNEP will provide the Utah WIC Program with the number of WIC participants referred to their healthy lifestyle weight management classes.</p> <p>2.1.4 Provide monthly articles on</p>	<p>2.1 – 2.1.9 were accomplished 114 decreased slightly for children in 2017 to 10.19% while the prevalence for infants increased to 26.86% and prevalence of 113 increased slightly to 5.76%</p>

Goals	Objectives	Activities	Outcome
		<p>pertinent nutrition and breastfeeding topics in the Utah WIC newsletter, WIC Wire</p> <p>2.1.5 Identify, review and consider for implementation any new obesity prevention programs</p> <p>2.1.6 Offer additional WIC training courses to all local WIC staff. These training courses will enhance nutrition assessment/counseling skills.</p> <p>2.1.7 Continue to investigate strategies for increasing fruit and vegetable intake among WIC participants.</p> <p>2.1.8 Collaborate with the Utah Intergenerational Poverty Initiative to reduce hunger/food insecurity</p> <p>2.1.9 Collaborate with the Utah ECIDS initiative to share data and look at demographic trends and program participation, as well as health outcomes.</p>	<p>2.18 WIC was excluded from the Intergenerational Poverty Initiative</p> <p>2.1.9 ECIDS collaboration meetings continue.</p>
<p>3.Prepare and implement key educational strategies related to EBT or E-WIC project planning.</p>	<p>3.1 During FY 2017, the Utah WIC Program will form an E-WIC Advisory Committee that will plan and implement E-WIC activities for the purpose of educating internal/external stakeholders.</p> <p>3.2 Identify/adapt/develop Training and resources for local WIC staff and participants</p>	<p>3.1.1 Develop PSAs, as applicable</p> <p>3.1.2 Create E-WIC Newsletter</p> <p>3.1.3Design E-WIC webpage</p> <p>3.1.4 Identify/adapt educational resources</p> <p>3.2.1 Research existing Training and resources from other states.</p> <p>3.2.2 Adapt/develop training and resources for Utah WIC</p>	<p>E-WIC activities delayed by a year.</p>

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<p>4. Increase the percent of women who gain the recommended amount of weight during pregnancy.</p>	<p>4.1 More one-on-one counseling for all pregnant and postpartum women.</p> <p>4.2 Identify new materials and provide appropriate education.</p> <p>4.3 Decrease the prevalence of high Maternal weight gain at 30.9% in 2017. And, decrease the prevalence of low maternal weight gain at 18.60% in 2016. VISION reports will be generated for the 2017 calendar year for comparison.</p>	<p>Program</p> <p>4.1.1 Research potential participant lessons and modules related to managing a healthy weight during pregnancy.</p> <p>4.1.2 The Utah WIC State/Local Nutrition Education Committee will continue to identify new resources that can be used in the WIC clinics to help women stay within the IOM recommended weight gain ranges.</p>	<p>4.1.1 – 4.1.2 were accomplished High maternal weight gain decreased to 23.10% while low maternal weight gain increased to 23.03%.</p>
<p>5. Implement new nutrition risk revisions/criteria.</p>	<p>5.1 Incorporate new nutrition risk information for USDA risk revisions related to 135, 352a, 352b, 359,411.3, 411.7, 411.9, 211 and 332.</p>	<p>5.1.1 Integrate into VISION computer system and adjust system parameters, if necessary.</p> <p>5.1.2 Develop local WIC staff training materials, as requested.</p> <p>5.1.3 Develop WIC participant educational materials, as needed.</p>	<p>5.1.1 – 5.1.3 were accomplished The risk implementation will extend into FY 2019 based on CDP's schedule.</p>