



Nutrition for Family Living

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April, 2004 Topics

“Taking Action for Children’s Health” Videoconference on April 21
Governor Doyle’s Activity Challenge Kicks off on April 19
Whole grain -- what's that?
Carbohydrate Labeling and the FDA “Calories Count” Initiative
Implications of diversity in addressing obesity
National USDA/Extension newsletter on child obesity

“Taking Action for Children’s Health” Videoconference on April 21

This videoconference is a follow-up to the “Working Together for Children’s Health” Summit held on March 3, 2004 in Stevens Point. The videoconference is sponsored by the Wisconsin Action for Healthy Kids Coalition, Wisconsin Dept. of Public Instruction, and Wisconsin Association of School Boards.

The videoconference includes two sessions:

- 1:00-2:25 Taking Action to Improve the School Nutrition and Physical Activity Environment – A Systematic Approach with Julie Allington from WI Dept of Public Instruction
- 2:30-4:00 School Policy Development and Implementation for Nutrition and Physical Activity Policies with Nancy Dorman from WI Association of School Boards

Registration information can be downloaded here

http://www.actionforhealthykids.org/AFHK/team_center/team_resources/WI/Videoconference.pdf

People are to register in teams from schools or school districts. There is no registration fee; the registration deadline is April 15. A videoconference location is available in each CESA, and those locations can be found in the information that is downloadable at the link above.



Nutrition for Family Living April, 2004

Governor Doyle's Activity Challenge Kicks off on April 19

On March 16 the Governor's office released news of the Wisconsin Governor's Challenge, a free 6-week program designed to encourage Wisconsinites to be more active. Residents can log on to <http://www.wisconsinchallenge.org> in order to register themselves or to register as a group (families, co-workers, schools, friends). Once registered, people keep track of their activity and log it online (paper log sheets are also available).

This Wisconsin challenge is a partnership with the President's Council on Physical Fitness and Sports. The President's Challenge is a national effort to increase activity levels among Americans. Governor Doyle is focusing on April 19 as a kickoff for Wisconsin residents to simultaneously join the 6-week Active Lifestyles program and complete it together. Participants are to meet a daily activity goal (30 minutes a day for adults/60 minutes a day for youth under 18) at least 5 days a week, for a total of 6 weeks. At the end of the 6 weeks, the Governor will honor those who completed the program as well as top achievers.

Registration for the program is confidential, and people monitor their own progress privately or compare their activities with others if they register as part of a group. While the kickoff to do this together as a state is April 19, people can register to start the 6-week program anytime.

To learn more, visit <http://www.wisconsinchallenge.org>.

Implications for Extension educators

The Wisconsin Governor's Challenge is a chance to highlight the importance and fun of physical activity in your communities, and to role model active lifestyles. Here are just a couple of suggestions that may complement your community's efforts to address activity levels:

- Enroll your county Extension office as a group (you could have a friendly competition with your county public health department).
- Enroll your nutrition task force or obesity coalition as a group – this could be an opportunity to highlight the work you are doing while demonstrating local community leaders' commitment to a more active lifestyle.

As mentioned above, the Wisconsin Governor's Challenge is a partnership with the national President's Challenge, which has additional programs available. For example in addition to the "Active Lifestyles" program being used for the Governor's Challenge, there is a "Presidential Champions" program designed for people who are already active and want to increase their activity. Through this program, points are earned and awards (presidential medals) can be ordered once certain point levels are met. There are options for schools to enroll (including home schools) as well. You can get to programs available through the President's Challenge via the Governor's Challenge site.

Check out all of Governor Doyle's Healthy Kids Initiatives at <http://healthykids.wisconsin.gov>. In addition to the Wisconsin Challenge, there are these initiatives: Access to School Breakfast, Focus On Fitness, and Tobacco-Free Wisconsin.



Whole grain -- what's that?

Advising people to choose whole grain foods more often seems simple enough, but actual food product distinctions can be very confusing. To help clarify the situation, the American Association of Cereal Chemists (AACC) proposes the following definition:

Whole cereal grains and foods made from them consist of the entire grain seed usually referred to as the kernel. The kernel is made of three components - the bran, the germ and the endosperm. If the kernel has been cracked, crushed or flaked, then in order to be called whole grain, it must retain nearly the same relative proportions of bran, germ and endosperm as the original grain.

Source: <http://www.aaccnet.org/news/CFWholeGrain.asp>

"Get on the Grain Train" and other Dietary Guidelines materials have helpful graphics and examples. They recommend choosing foods with the following items first on the ingredient list: whole-wheat flour, bulgur, oatmeal, rye bread, whole cornmeal, brown rice, graham flour, pearl barley and popcorn. (see <http://www.usda.gov/cnpp/Pubs/Brochures/GrainTrainPamphlet.pdf>).

The following claim can only be used on a product label when the food contains at least 51% whole grains (by weight) and is also low in fat: "diets rich in whole-grain foods and other plant foods and low in total fat, saturated fat, and cholesterol may help reduce the risk of heart disease and certain cancers."

Don't be fooled by brown-colored breads and foods labeled as "wheat," "multi-grain," and "stone-ground." They may or may NOT be made from whole-grain ingredients.

Implication for educators: When you are teaching lessons on the grain group or dietary fiber (such as pages 6-8 of "How Food Affects You" http://www.uwex.edu/ces/wnep/tch_res/res_detail.cfm?resource_id=29), clarifying language about whole grains can be helpful as learners gain skills and confidence in following the Dietary Guidelines advice: "Choose a variety of grains daily, especially whole grains."

Additional notes

There is a press release about whole grains in the April press release package from Jo Futrell <http://www.cft.uwex.edu/ces/news/>

If you feel like everyone around you is on carbohydrate restriction, check out the results of a survey conducted by the Gallup Organization for the Wheat Foods Council and the American Bakers Association (see next page).

Survey results can be viewed via Powerpoint at <http://www.wheatfoods.org/ppts/goingagainstthegrain.ppt>

A research summary is printable from <http://www.wheatfoods.org/pdfs/researchsummary.pdf>



Nutrition for Family Living April, 2004

Survey highlights:

- 75% of shoppers believed high-protein, low-carb diets may offer short-term results, but can be difficult to maintain long term
- 70% agreed their body needs carbs for energy, and depriving themselves of these foods is not healthy
- 82% of consumers agreed the Food Guide Pyramid is the basis of a sensible, healthful eating plan (unchanged from 1998 survey)
- 51% agreed that high-protein, low-carb diets are based on sound nutrition principles (down from 59% in 1998)
- 64% believed that grain foods are not a cause of obesity

The survey was conducted from November 18, 2002 through December 10, 2002. Households were randomly selected for telephone interview. The primary grocery shopper in the household was interviewed – 1,000 households were interviewed.

Thanks to Mary Fran Lepaska for calling our attention to this survey.



Carbohydrate Labeling and the FDA "Calories Count" Initiative

Contributed by Amanda Park, UW-Madison Nutritional Sciences graduate student

As the number of Americans following low-carb/high-protein diets continues to rise, the onslaught of "low-carb" products hitting our grocery store shelves grows. In an effort to protect the public from misleading and inaccurate claims, consumer advocate groups petitioned the Food and Drug Administration (FDA) to regulate carbohydrate information on food labels. In the meantime, manufacturers have started using terms such as "low carb," "net carb," "free carb" and "effective carb" on product packaging for everything from bakery items to beer. Even products that are, and always have been, low in carbohydrates (such as peanuts) are carrying these confusing label claims.

Much of this terminology has yet to be legally defined. However, "net-carbs" usually refers to the carbohydrate content of a food after subtracting fiber, while "effective-carbs" are those left after subtracting both fiber and sugar alcohol (maltitol, lactitol, sorbitol, etc). Manufacturers claim that these types of carbohydrate have little impact on blood sugars and/or insulin, and should be consumed more freely than other forms of carbohydrates like sugar and starch. What they fail to mention is that many of these "guilt-free" products have just as many calories and higher prices than their counterparts.

On March 12, FDA announced plans to develop new rules for carbohydrate label claims. This is part of FDA's broader "Calories Count" initiative and the U.S. Department of Health and Human Services' efforts to combat the national obesity epidemic. The new FDA initiative was announced following a report from the U.S. Centers for Disease Control and Prevention (CDC) that shows poor diet and inactivity are poised to become the leading preventable cause of death among Americans -- causing an estimated 400,000 deaths in 2000.

Until FDA's new labeling rules take effect, there may be a period of confusing/conflicting information on food labels and we risk seeing a repeat of the last decade when fats were the targeted dietary demons. Many consumers believed that low-fat and fat-free products could be consumed in large quantities without contributing to unwanted weight gain. Instead of eating one regular cookie, dieters confidently ate handfuls of fat-free cookies and wondered why they weren't losing weight.

Implications for educators: Extension educators can help prevent consumer confusion as the new labeling rules take effect. As low-carb diet information proliferates, people need to remember that the combination of consuming too many calories and being too inactive is the ultimate cause of unwanted weight gain. Excess calories are stored as body fat, whether those calories come from low-fat cookies or "low-carb" muffins.

For more information on the FDA Calories Count initiative, proposed label changes, and the Department of Health and Human Services recommendations for obesity prevention, see the fact sheet, Q/A section, and other information at <http://www.fda.gov/oc/initiatives/obesity/> and <http://www.hhs.gov/news/press/2004pres/20040312.html>.



Implications of diversity in addressing obesity

With the current emphasis on curbing the rise of obesity rates in the U.S., it is imperative to remain aware of cultural and economic factors that influence health behaviors. One of the behaviors about which the influence of cultural and economic factors is not well understood is child feeding. Two studies utilizing focus groups to explore this topic were recently published in the *Journal of the American Dietetic Association*. They are summarized below, using the racial/ethnic categorization terms that were used by the respective study authors.

Latina mothers of preschool children and their perceptions about young children's weights.

Researchers in California conducted focus groups with 43 Latina mothers of 2- to 5-year old children participating in WIC. The purpose of the focus groups was to assess the mothers' health beliefs and attitudes about early childhood weight issues, and to use the results to inform future nutrition education efforts. The research was published in the March issue of the *Journal of the American Dietetic Association* (Crawford et al. *J Am Diet Assoc.* 2004;104:387-394).

Mothers in the focus groups were asked a series of questions about their own weights and activity levels, as well as those of their own children. They were also shown pictures of children of varying shapes and sizes and asked to comment on those children's health.

Researchers identified themes that emerged from the focus group discussions, including the following:

Themes related to health beliefs surrounding weight.

- Moderate overweight among young children is often what parents perceive as looking the "best" or the "healthiest." (overweight children perceived as most likely to "make it through" an illness)
- While being healthy is important, being moderately overweight in early childhood is not necessarily unhealthful as long as the child looks and feels good.
- Health for young children is determined by their happiness, being part of a loving, attentive family, and having good nutrition and exercise.
- Thinness may be associated with poor health (malnutrition and intestinal infections).

Themes related to effects and causes of overweight.

- A young child's weight/shape is mostly determined by genetics.
- Young children who are overweight are likely to grow out of it.
- Overweight can cause children to be inactive, tired, sick and teased by their peers.

Themes related to life values and concerns.

- Being happy with family is highest ranked life value.
- Numerous parental concerns compete with nutrition and feeding issues.
- Cultural beliefs and practices around foods and activity can be challenging in the US environment.



Nutrition for Family Living April, 2004

Themes related to strategies for making changes in children's eating and activity patterns.

- Parents can influence a child's eating and activity patterns by modeling behaviors and as necessary, changing their own.
- Parents prefer to learn from facilitated group discussion than from traditional teaching.
- Parents have a good deal of nutrition knowledge, but need specific information on how to make changes.

Implications for educators:

Increases in overweight among low-income preschool children are particularly high in Latino children, and the health consequences are real. Nutrition education efforts directed to prevent and reduce overweight among children must take place within given cultural and environmental contexts. Based on the focus group results, study authors recommend some strategies for addressing overweight among Latino preschoolers:

Focus on family – central importance of family was a clear theme emerging from focus groups. Working through the family unit, rather than focusing on the children's behavior alone, may be a successful approach for improving diet and physical activity behaviors of Latino preschoolers.

Use facilitated discussion – the Latina mothers reported learning a great deal from WIC, but they said they would like more help with implementing the advice they were getting. They expressed a desire for facilitated discussion, where participants could share ideas and experiences with each other.

Take advantage of role modeling – a strong belief was conveyed through the focus groups that parental behaviors can positively influence children's behavior through role modeling. Educators can build on this belief by helping parents incorporate healthful eating and activity practices into their own lives.

Child feeding and child weight attitudes, practices, and concerns in socioeconomically diverse mothers.

Researchers in Georgia and Pennsylvania conducted focus groups with mothers of young children (2 to 5 year olds). The 12 focus groups varied by race/ethnicity and income: white, African American, and Hispanic-American low-income parents (3 focus groups for each race/ethnicity) and white middle-income parents (3 focus groups). The purpose of the focus groups was to explore maternal attitudes, concerns, and practices related to child feeding and perceptions about child weight. The research was published in the February 2004 issue of the Journal of the American Dietetic Association (Sherry et al. J Am Diet Assoc. 2004;104:215-221).

Focus group participants were asked questions related to child feeding practices, including what they found difficult and what they found easy about feeding their children, and some questions about how they know their child has had enough to eat and what foods they restrict or use for rewards. As in the study described above, participants were shown drawings of children of different shapes and sizes and asked to describe the children's weight status. They were also asked whether they had concerns about their own children's weight.



Nutrition for Family Living April, 2004

Researchers identified themes that emerged from the focus group discussions, including the following:

Themes around maternal feeding goals and beliefs about what is good nutrition.

- All groups identified “good nutrition” and “getting their children to eat” as their main goals when feeding their children. Hispanic participants also mentioned valuing the use of traditional foods.
- All groups said they don’t want their children eating too many sweets. Hispanic participants were also concerned about “processed foods” and middle-income whites were also concerned about high-fat foods.
- Mothers reported the following strategies for controlling foods they did not want their children eating too much of: not buying, hiding, controlling portions, or giving an approved form (like fruit-flavored gelatin instead of candy).
- Having a child clean his or her plate did not emerge as a theme in any of the focus groups.

Themes around what determined which foods would be available at home

- Cost was the key determinant in 6 of the 9 low-income groups and in all of the middle income groups. Participants said they bought foods on sale and used coupons. Only one of the three Hispanic-American focus groups mentioned cost, but 2 of the Hispanic-American groups specifically mentioned transportation and time to shop as concerns.
- Hispanic-American participants were particularly concerned about having “what they needed” (nutritious, children like, easy/quick preparation).

Themes around mealtime environment and what makes feeding young children easy or difficult.

- All of the focus groups reported chaos and stress at mealtime.
- Feeding was considered fun and easy when the child liked the food and preparation was easy.
- Feeding was considered difficult when the child would not eat or did not like the food served.
- Six of the nine low-income groups cited watching television during meals as competition for their children’s attention to food and eating.
- Hispanic-American participants reported fixing traditional foods and focusing on persuading their children to eat enough.
- Middle-income white mothers reported being challenged by getting their children to eat a balanced diet and enough – but not too much – food.
- Overall, mothers determined portion sizes and reported that they knew how much their children would eat or needed to eat. However several mothers requested advice on appropriate portion sizes.



Nutrition for Family Living April, 2004

- Middle-income white mothers also reported feeding challenges such as adults and children being tired, influence of older siblings, and keeping children on a breakfast time schedule so that family members could get to work and school on time.
- All of the African American focus groups reported feeding challenges associated with external factors such as having company, children playing outside with other children, limited food supply, sick children or picky eaters, and children who drink fluids before meals.

Themes around strategies that mothers use to persuade their children to eat.

- All groups reported taking their children's likes and dislikes into account when planning meals.
- Six of the nine low-income groups (two from each racial/ethnic group) reported accommodating requests for specific foods during meals.
- Food and non-food bribes/rewards were commonly used to get children to do certain things, including finish a meal.
- Common foods used as rewards were ice cream, fruit-flavored gelatin, popcorn, and cookies. Fruit was identified as being used as a reward in all of the Hispanic-American focus groups, and was less commonly identified among the other racial/ethnic groups.

Themes around the mothers' reactions when their children tell them they are full or hungry.

- Eleven of the twelve focus groups said "full" usually meant their children wanted to do something else. Mothers then reported encouraging or pressuring their children to eat. One middle-income group believed their children were actually full when they said they were.
- Mothers reported that "hungry" usually did mean hungry, but could mean bored or could be used as a way to distract from something the child didn't want to do.
- Hispanic-American focus groups were concerned that "not hungry" meant "ill".

Themes around mothers' concerns and general beliefs about children's weight.

- All low-income groups cited underweight as a concern. Overweight was identified as a concern in all white groups and in one African-American group.
- Hispanic-American mothers reported believing that good health and what their children ate was more important than weight. However they did not want their children to be underweight or overweight.
- Middle-income white groups were concerned about eating disorders and developing good eating habits early in life.
- African-American mothers generally believed that children would outgrow their overweight, or that having a high weight in childhood was healthy.
- About 1/5 of low-income African American mothers and middle-income white mothers selected the drawing of the heaviest child (7th child out of 7 drawings) as the



Nutrition for Family Living April, 2004

cutpoint for defining overweight. This suggests these mothers may accept as normal weight what public health officials call overweight. The vast majority of low-income white mothers and Hispanic-American mothers chose the 5th or 6th child out of 7 drawings, suggesting an assessment of overweight that is more in line with a public health definition.

Implications for educators:

Mothers in these focus groups identified feeding goals for their children that are consistent with the Dietary Guidelines for Americans and Food Guide Pyramid, but some of their methods for reaching those goals do not follow recommended feeding practices. Based on the focus group results, study authors recommend some strategies for addressing child feeding issues:

Educators can build on mothers' feeding goals by helping them determine appropriate portion sizes, and by helping them find ways to plan quick meals and stretch their food dollars.

Educators can help mothers create calmer mealtime environments by helping them make the "division of responsibility" in child feeding work for them. This may include helping mothers feel empowered to cook one meal for the family without having to prepare special foods to accommodate likes/dislikes or helping mothers understand their children's ability to know when they are full and hungry.

Additionally, TV viewing during mealtime was commonly reported by low-income mothers in these focus groups as a challenge to child feeding. Helping families focus on mealtime as an activity separate from other activities, like TV viewing, may contribute toward less chaotic mealtimes.

The study authors called for further research into maternal attitudes, practices, and concerns related to child feeding. Some of the topics needing further study for greater understanding include the importance and use of culturally specific foods, the use of food as bribes and rewards, procedures used to introduce new foods, fathers' participation in encouraging or restricting food consumption at meals, the time frame used to determine whether a child has eaten enough, how to help mothers accept their children's reported lack of hunger, and why mothers respond to children's specific alternative food requests at meal time.

A word about these studies...

While differences in attitudes, practices, and concerns about child feeding and weight exist among socioeconomic groups, it is not constructive to make comparisons or generalizations based on these limited study results. Recognizing that there are differences directs us to use more learner-centered approaches to education around child feeding issues. When Extension educators listen carefully to learners' concerns, beliefs, and motivations they can more effectively engage them in their own education about healthful ways to feed their children.



Nutrition for Family Living April, 2004

National USDA/Extension newsletter on child obesity

The USDA/Extension "Reversing Childhood Obesity Trends" team has an informative newsletter that summarizes this team's work on helping children achieve healthy weights, along with a calendar of related events, research highlights, and recommended resources. This team's work is part of a USDA initiative to address the growing concerns of child overweight/obesity. The newsletters are archived at the UC-Berkeley Center for Weight and Health's website, which also has excellent resources on this important topic. For example, the Center's "Children and Weight: What Communities Can Do About It" kit (available on loan from the UW-Extension Coop. Extension Media Collection) has been a helpful guide to local coalitions as become established and plan/implement their activities. To downlink the newsletter, go to the bottom of the CSREES/USDA link at <http://www.cnr.berkeley.edu/cwh/>.