

Local Agency WIC Nutritionists November 29, 2011 Meeting

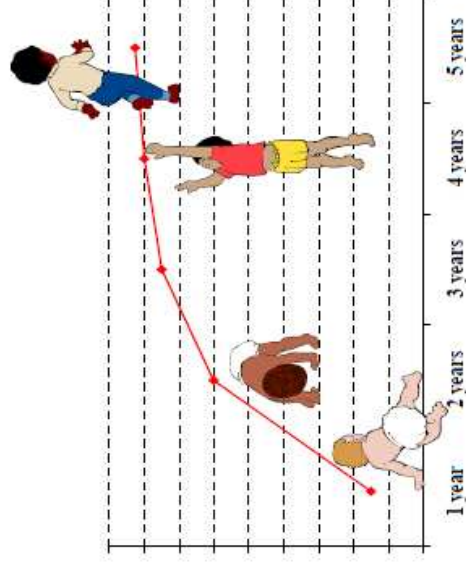
Agenda:

- 2:00-2:15 Introductions, check in
- 2:15-2:45 Updates & announcements
- 2:45-3:45 CE component:
Implementation of WHO Growth Charts &
Opportunities for Counseling
- 3:45- 4:00 Wrap Up

Growth: Implementation of WHO Growth Charts & Opportunities for Counseling

Vernita Reyna, Julie Aalbers & Cheryl Alto

November 29, 2011

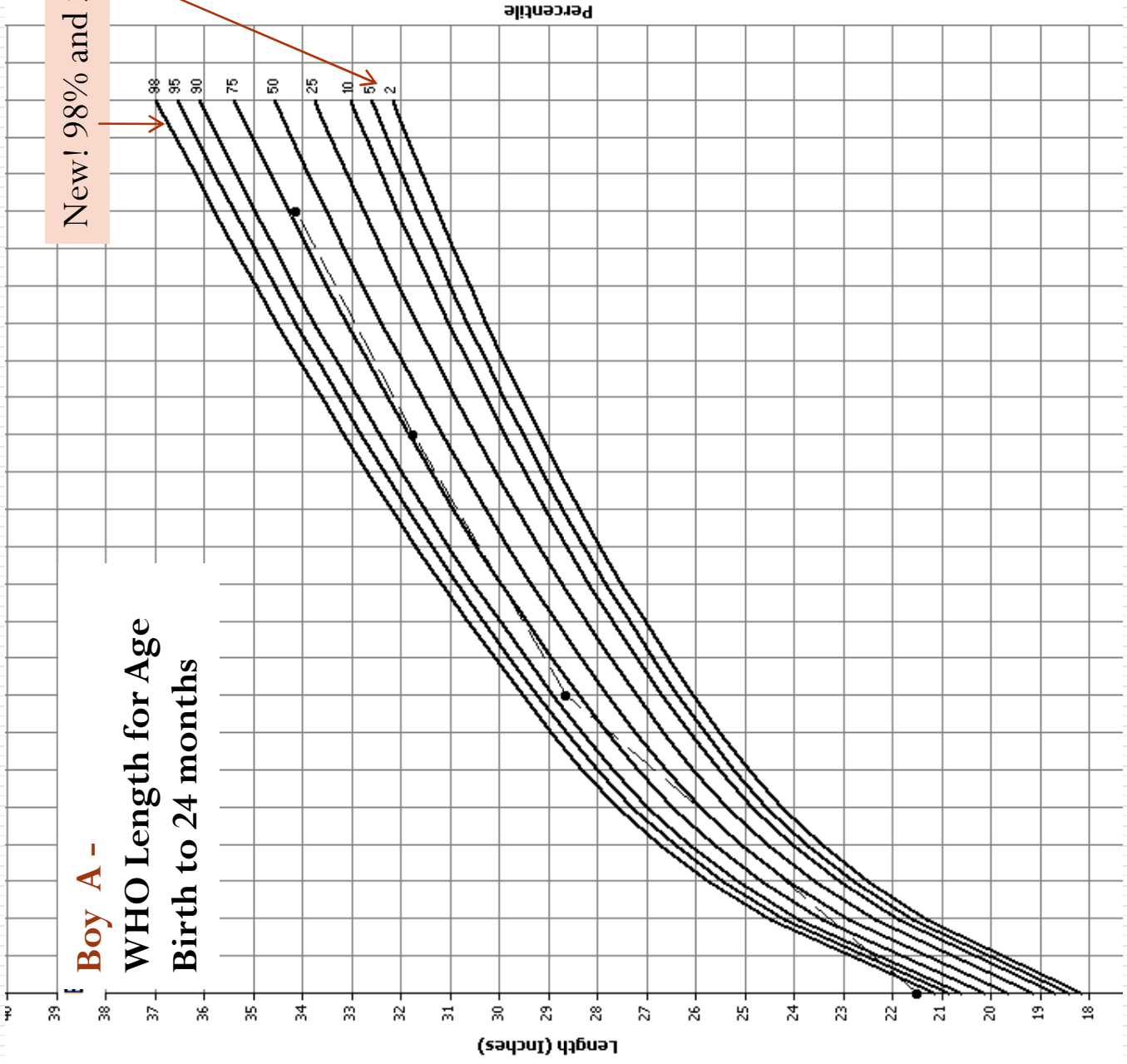


What have you heard?

What have been the responses from the inservice discussion activity?

- ◆ How do you use growth charts?
- ◆ When do you show growth charts to parents?
- ◆ How do you describe the graphs to parents?

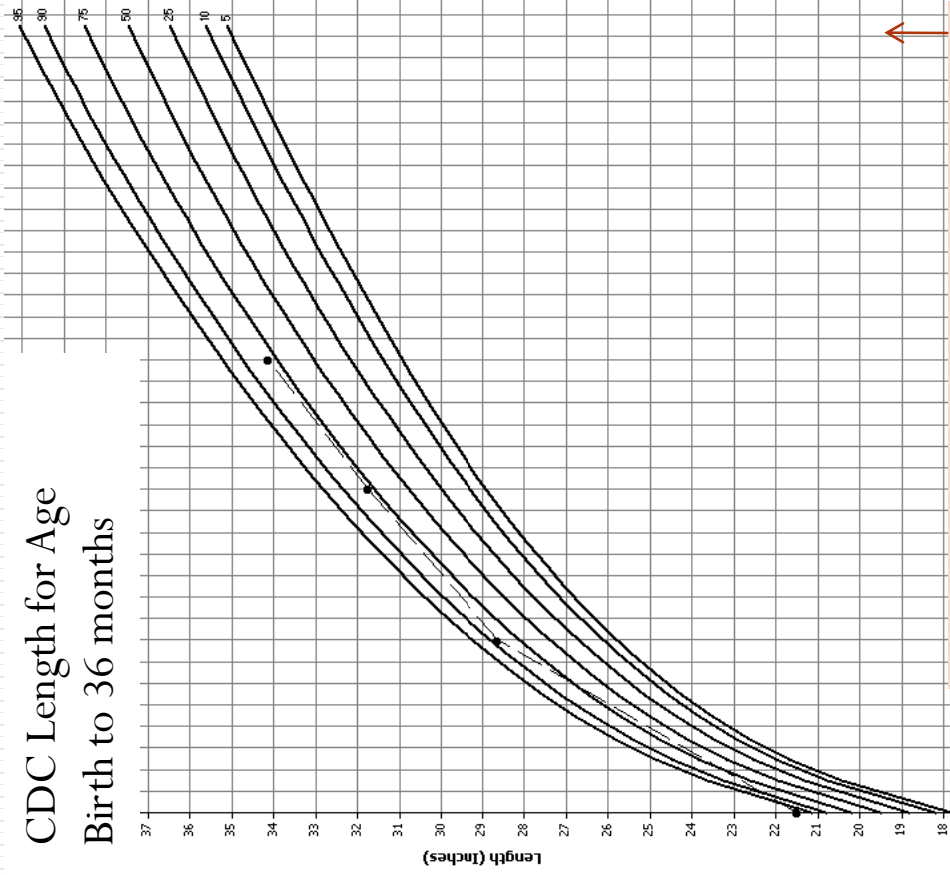
Boy A -
WHO Length for Age
Birth to 24 months



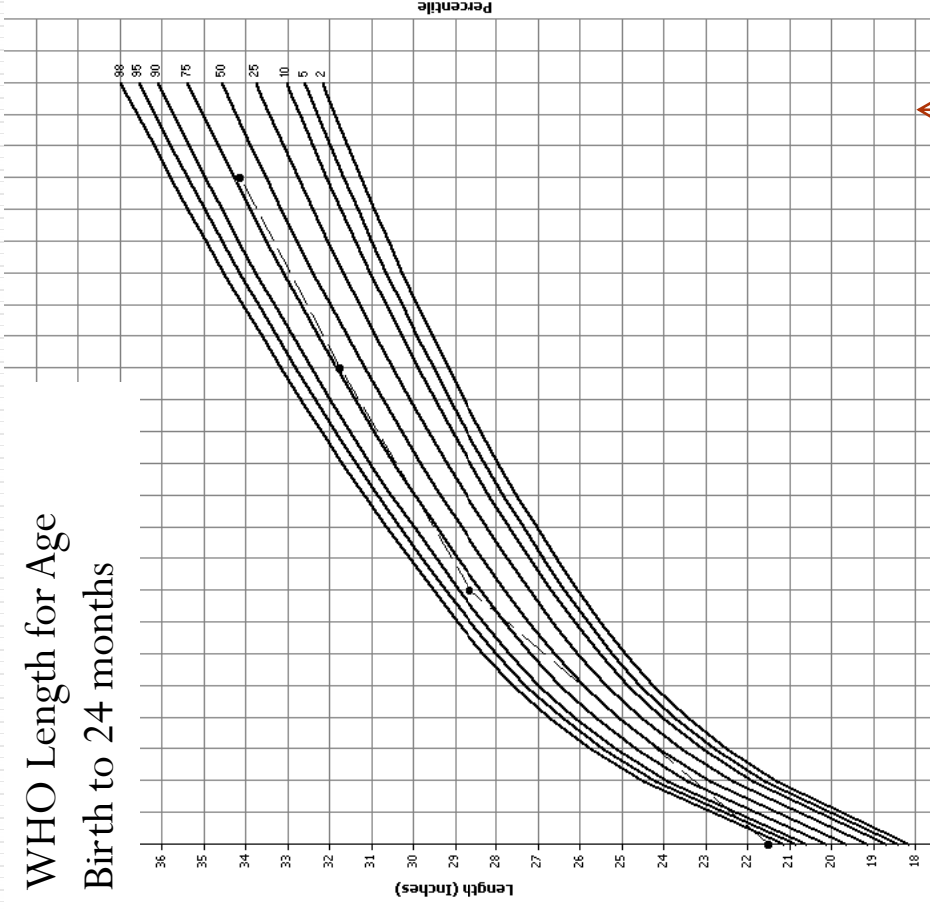
New! 98% and 2 % lines

Boy A: Comparison of Length for Age

CDC Length for Age
Birth to 36 months



WHO Length for Age
Birth to 24 months



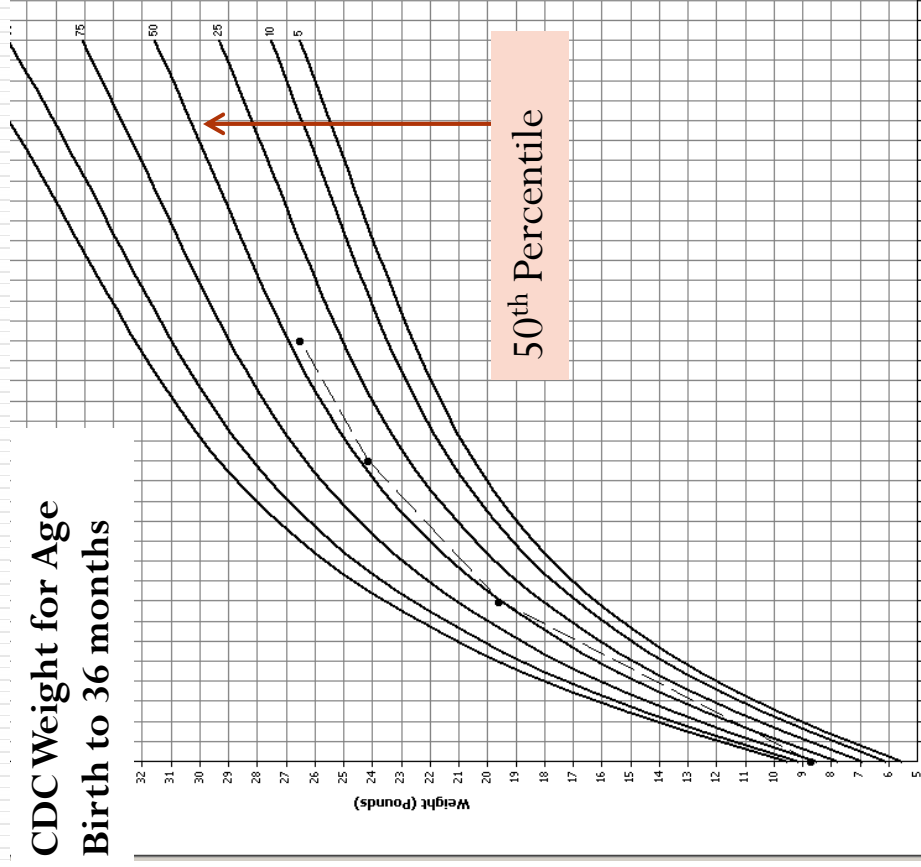
Graph Ends at 36 Months

Graphs Ends at 24 Months

Percentiles are approximately 75th percentile on both graphs.

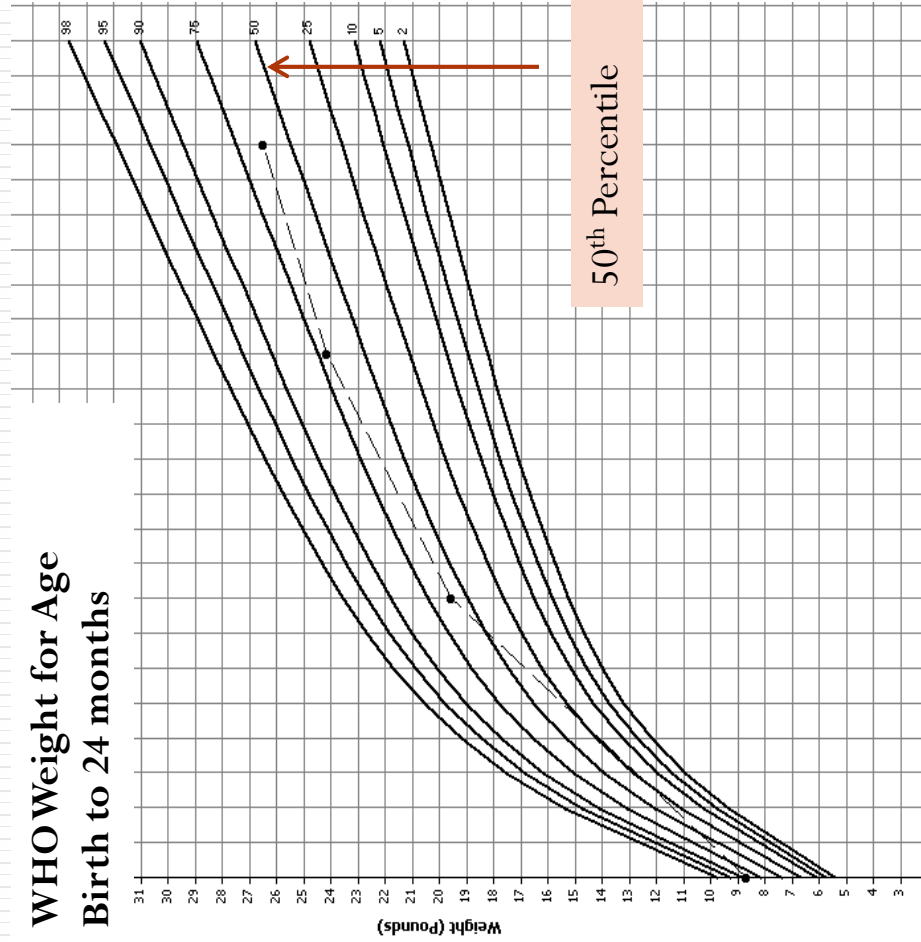
Boy A: Comparison of Weight for Age

CDC Weight for Age
Birth to 36 months



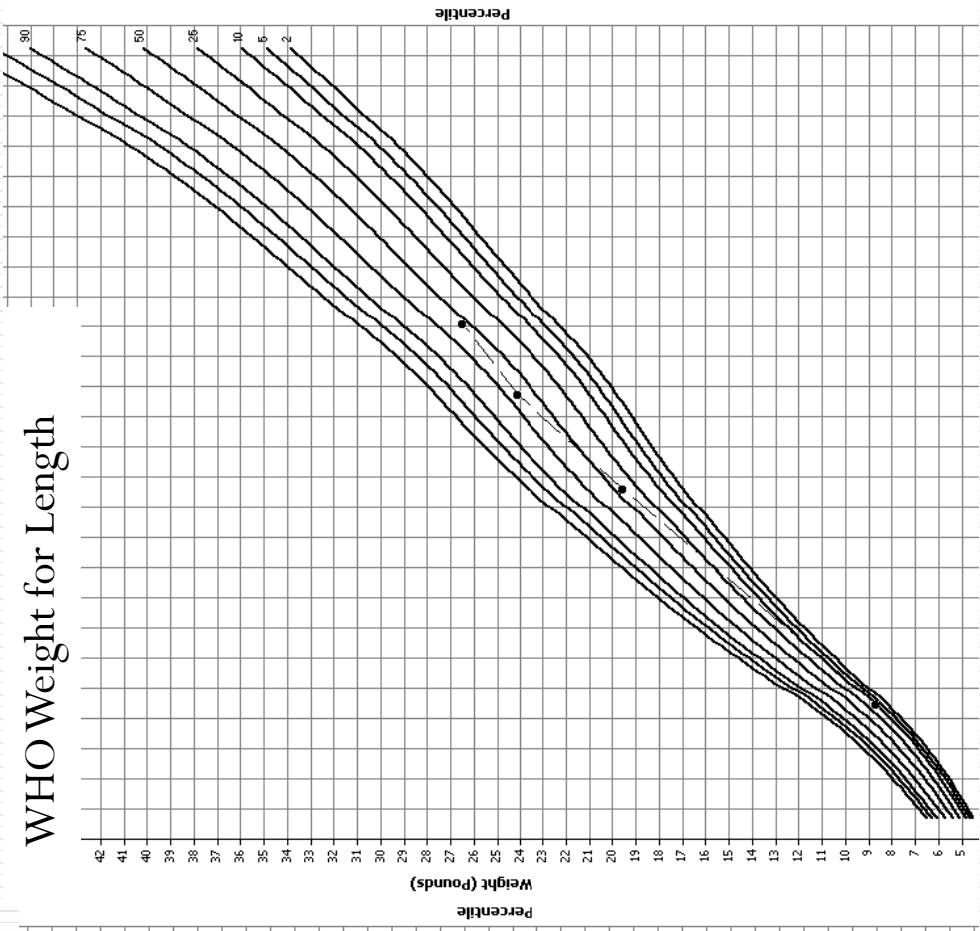
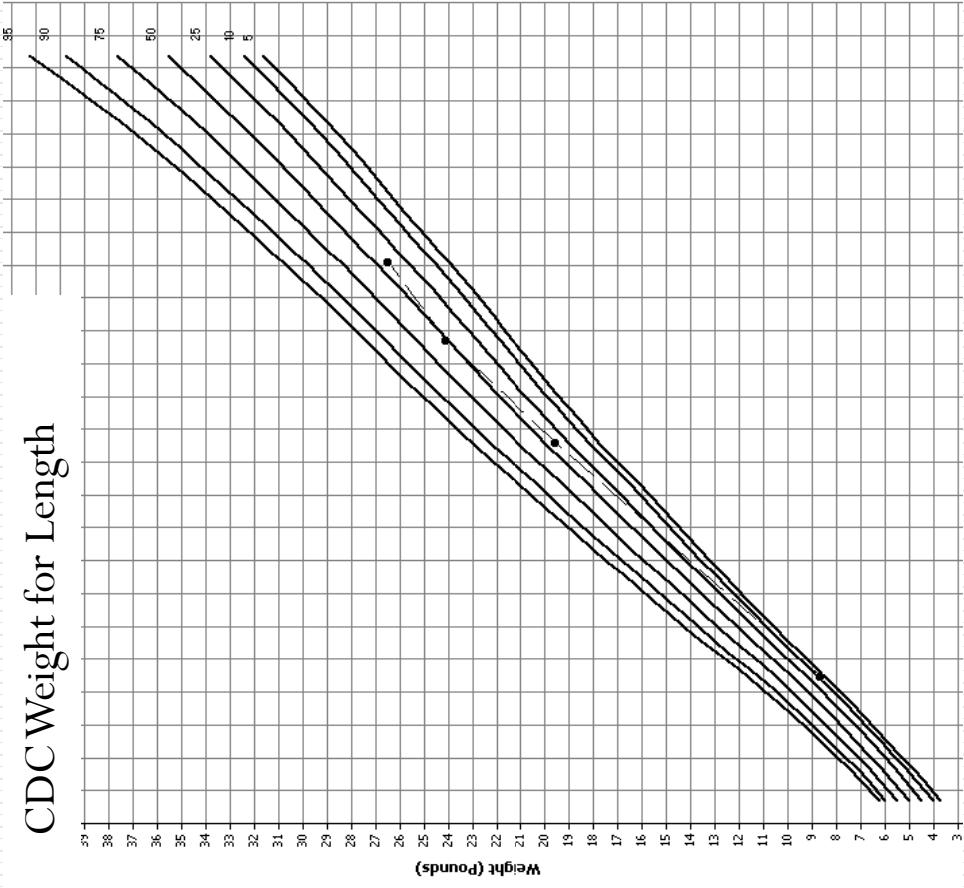
On CDC, he charts slightly below 50th%

WHO Weight for Age
Birth to 24 months



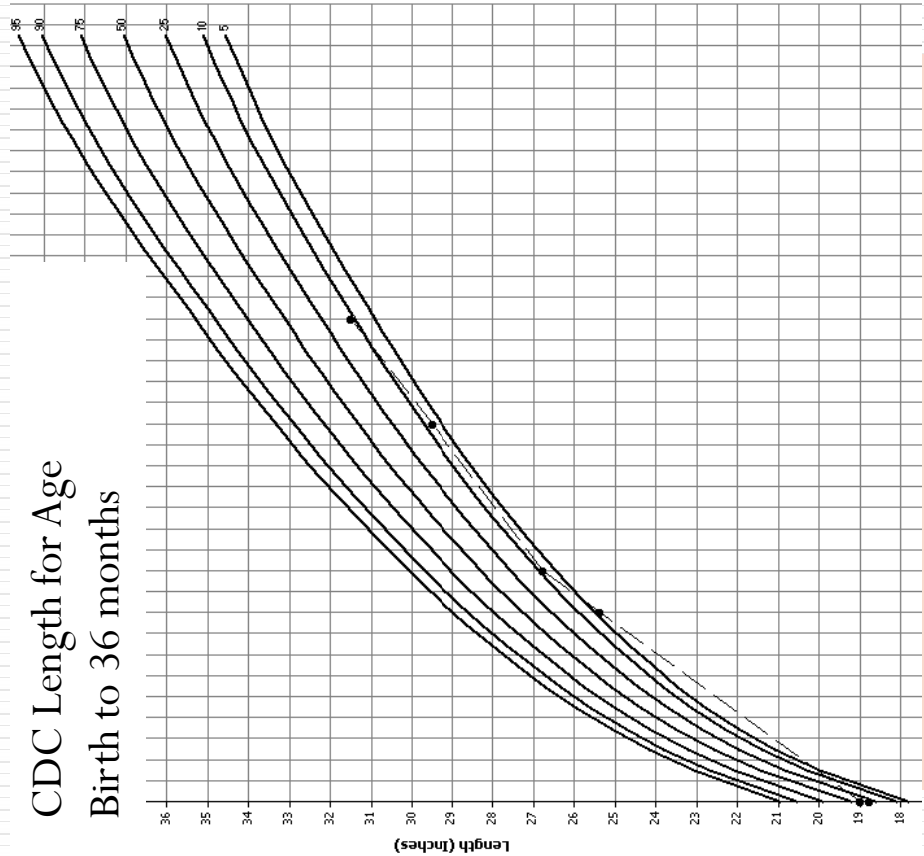
On WHO, he charts slightly above 50th%

Boy A: Comparison of Weight for Length

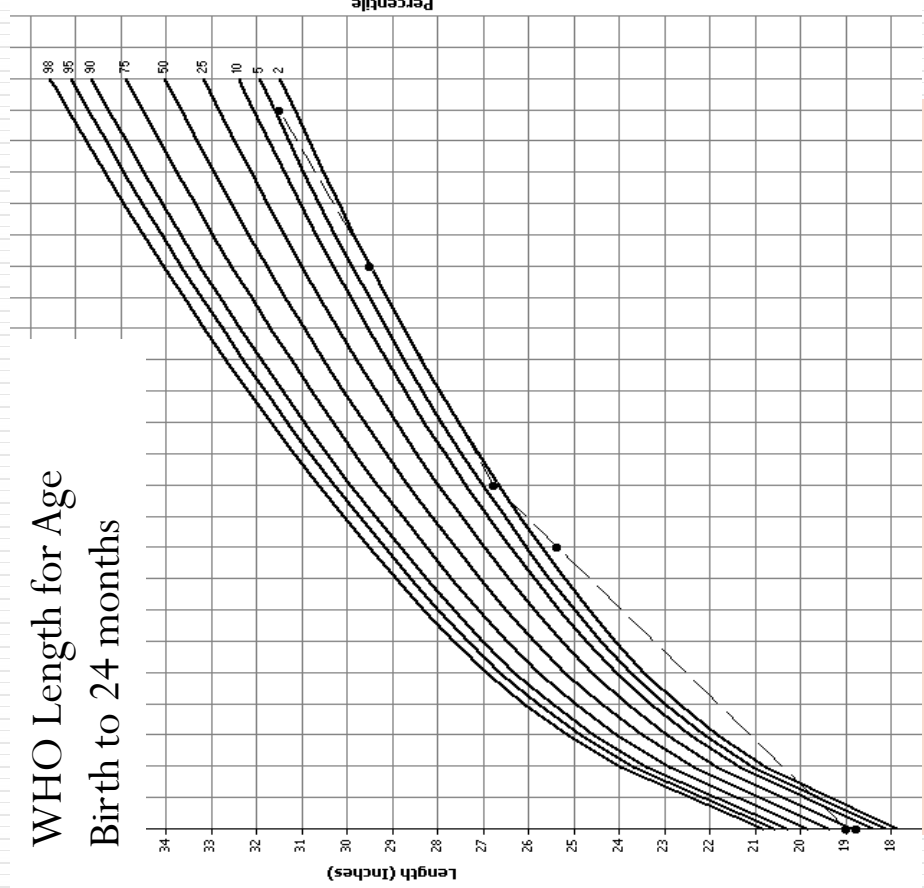


WHO graph is slightly “wobbly”. Middle range child graphs similarly.

Girl A: Comparison Length for Age



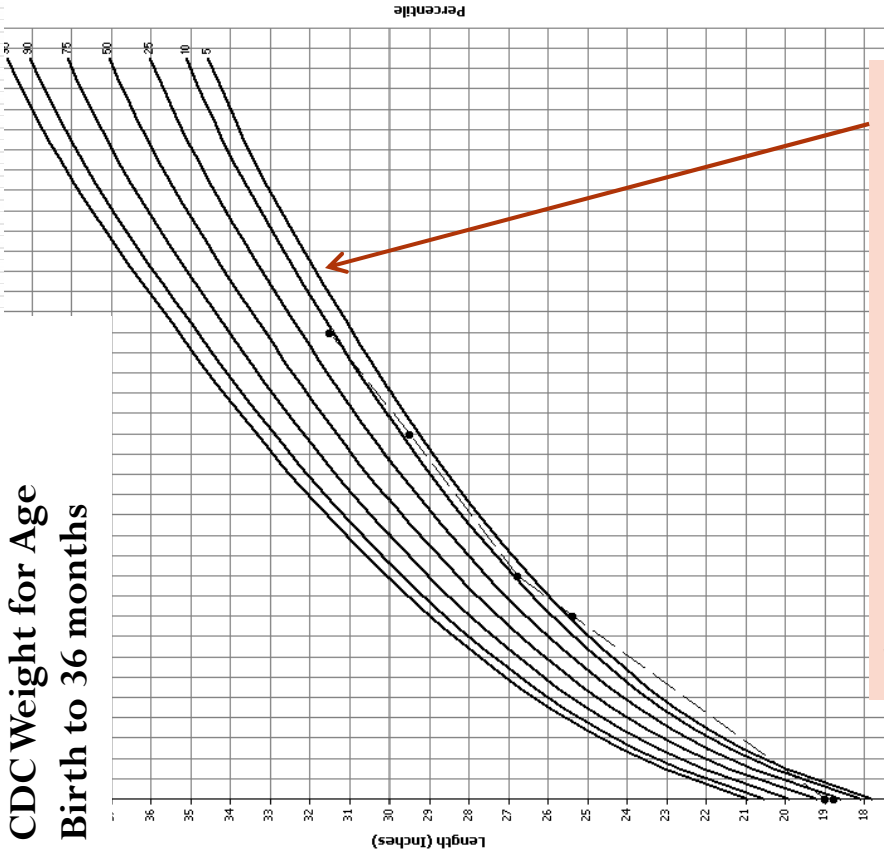
Bottom line is 5th percentile, child graphs on slightly higher percentile.



Bottom line is 2nd percentile, Child graphs on slightly lower percentile.

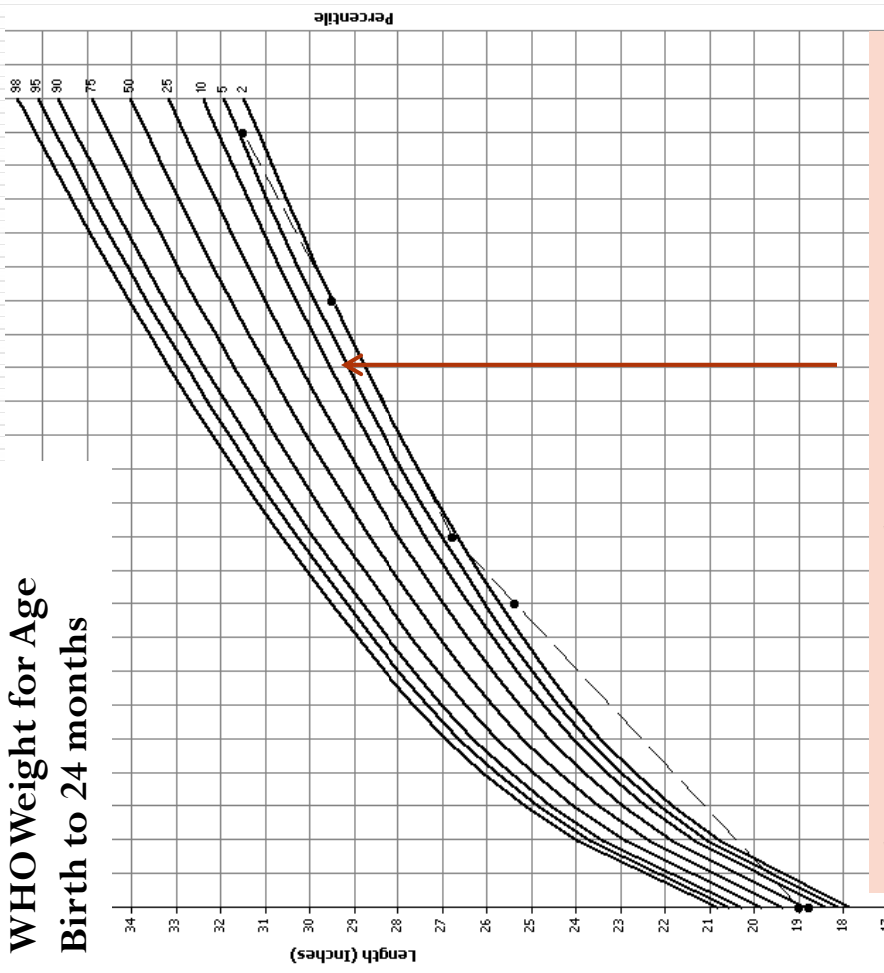
Girl A: Comparison Weight for Age

CDC Weight for Age
Birth to 36 months



5th percentile is the bottom line

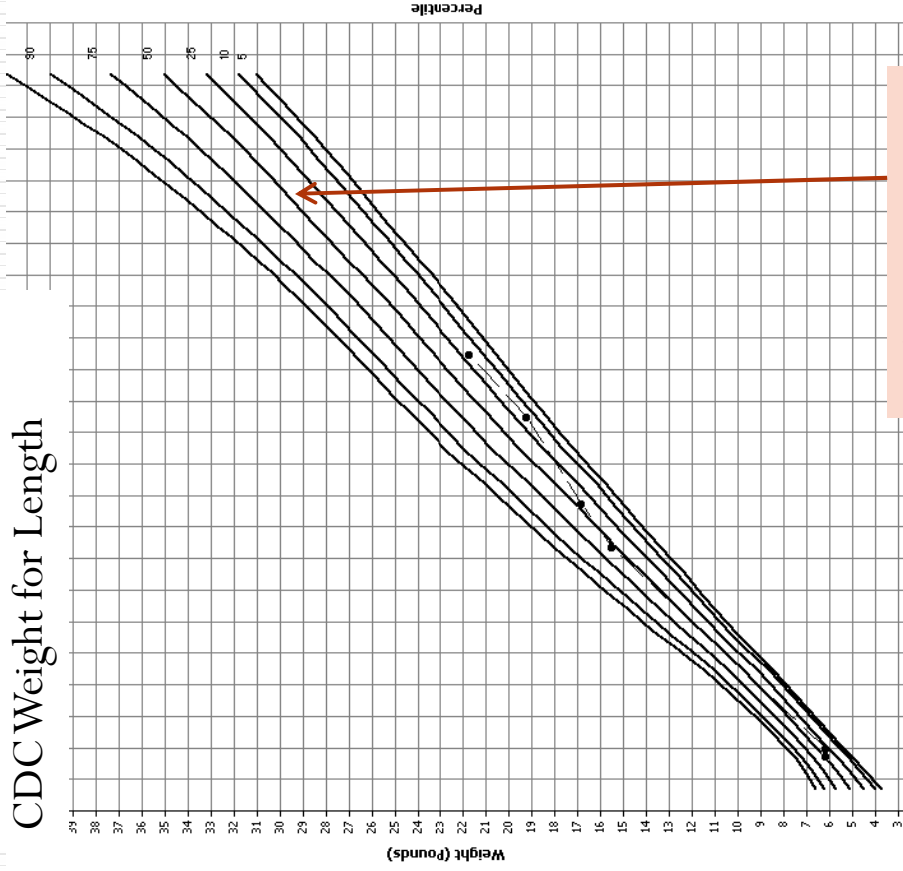
WHO Weight for Age
Birth to 24 months



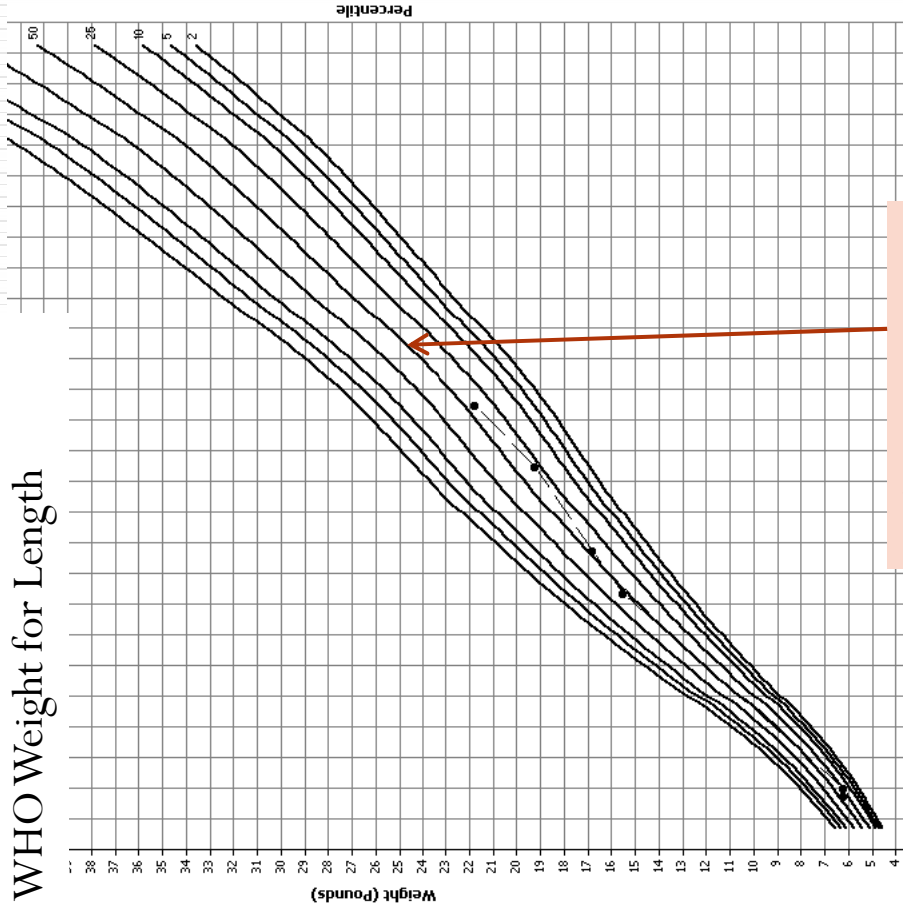
5th percentile is the 2nd line from the bottom

Child graphs on lower percentile on WHO graph.

Girl A: Comparison of Weight for Length



50th percentile

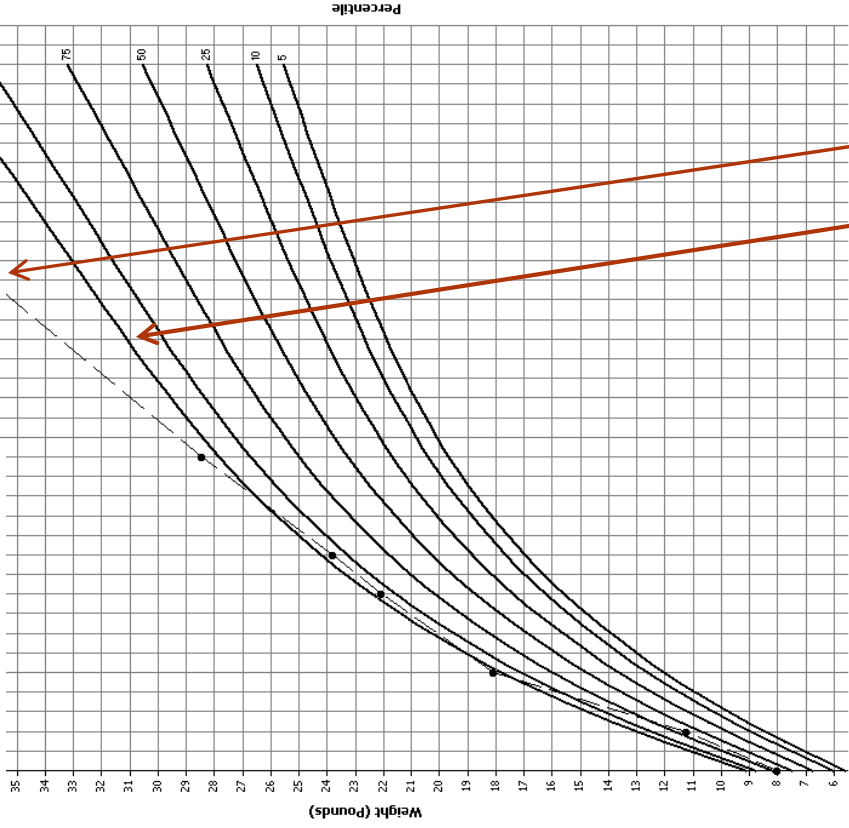


50th percentile

Child's growth is closer to the 50th percentile on the WHO graph.

Girl B: Comparison of Weight for Age

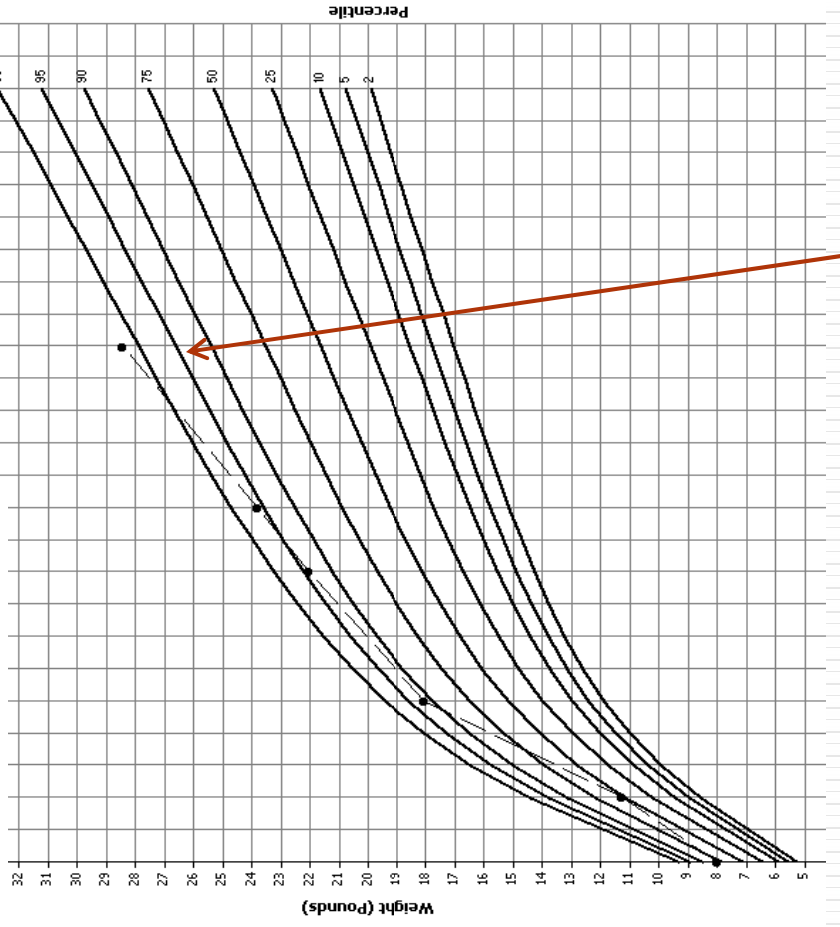
CDC Weight for Age



95th percentile is top line

Weight collected at 25 months of age shows on CDC graph, but not on WHO graph.

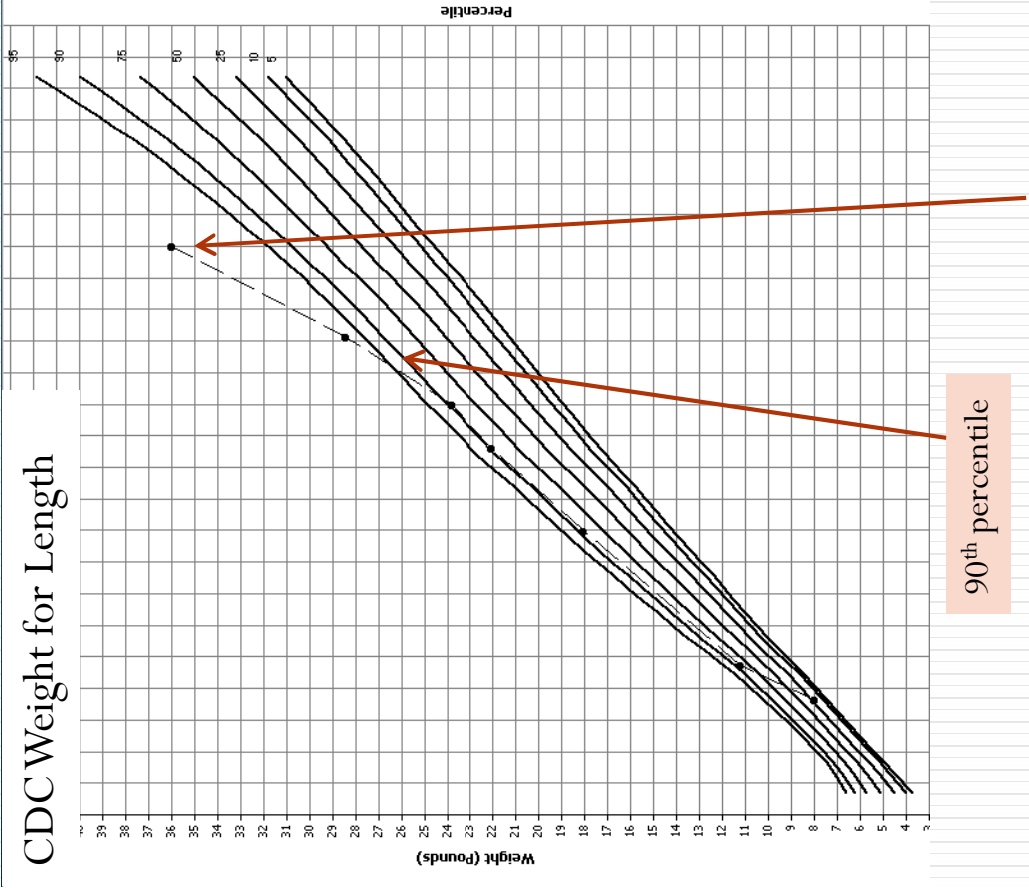
WHO Weight for Age



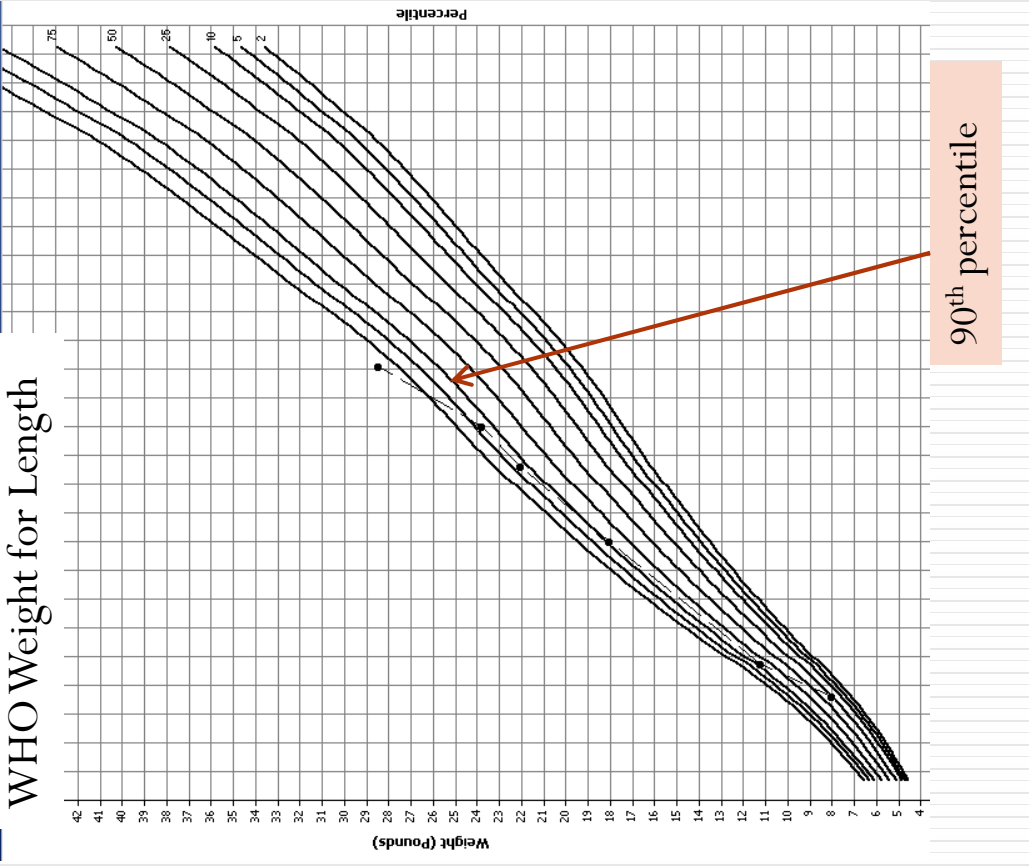
95th percentile is second from top

Child graphs on 90- 95th percentile on both charts.

Girl B Comparison Weight for Length



90th percentile



90th percentile

CDC chart displays the 25 month of age measurement

Frequently Asked Questions

FAQ Discussion

Opportunities for counseling

Applying principles of critical thinking to discussions regarding growth and weight

Be participant
centered

Obesity
Epidemic

Complex,
multi-factorial
issue

Earlier onset of
adult disease

Parents as role
models

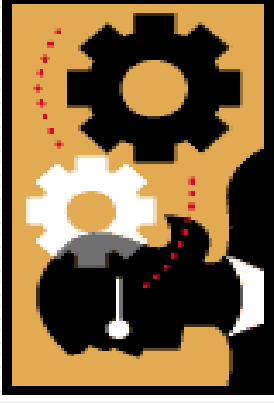
What to ask
What to do
What to say

Do no harm

Marketing to
kids is big
business

Where to
refer?

Focusing on
behaviors vs.
weight loss



What is Critical Thinking?

There are four basic components to critical thinking:

1. Collect all pertinent information from the participant.
2. Clarify or gather additional details.
3. Analyze and evaluate all the information you have collected.
4. Determine the best course of action.

Applying critical thinking to growth
assessment: a mixture of art, science
and experience

*“I am familiar with this growth pattern
and the possible causes. I wonder
what is going on for this participant for
this growth pattern to happen. What is
his/her story? And how can I help?”*

What pertinent information, data or skills do you draw upon in your counseling session?

TWIST data

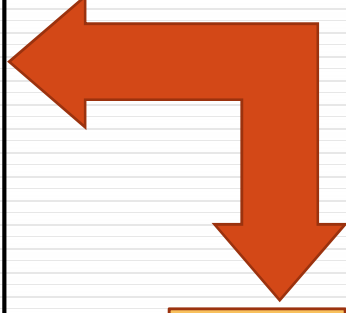
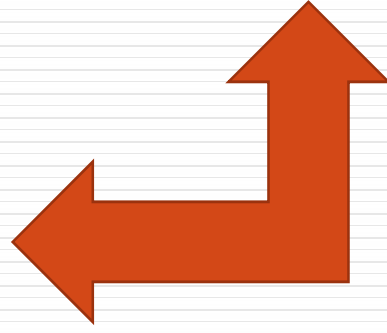
TWIST Data:
Anthropometric
Biochemical
Growth charts
Nutrition risks
Diet risks
Progress notes

Counselor knowledge, beliefs

Critical thinking skills
Nutrition & medical knowledge
Life & personal experiences
Counseling style

Information from participant

Nutrition & medical knowledge
Health history
Attitude, beliefs & behaviors
Parenting style
Environmental factors
Support systems



Care plan development for positive health outcome

Critical Thinking

How do growth charts fit into your complete assessment?

How do you.....

Know when to show 'em, know when to hold 'em.....



Growth charts

- What would be the pros and cons of showing vs. not showing the growth charts for an infant or child in the following situations?
 - One growth plot vs. several growth plots
 - Parent who is overly concerned about growth vs. parent who has no concerns about growth
 - As a means of starting the conversation vs. summarizing the conversation

Growth assessment: What probing questions would you ask?

- A child with several growth points, demonstrating changes in the growth pattern which is:
 - Slow, smooth shift up or down at any growth percentile
 - Rapid shift up or down at any growth percentile

Final thoughts? Questions? Suggestions?

Vernita Reyna: Vernita.d.reyna@state.or.us

Julie Aalbers: Julie.aalbers@state.or.us

Cheryl Alto: Cheryl.l.alto@state.or.us