



# Idaho WIC Training

## Prenatal Nutrition

### Trainer



IDAHO DEPARTMENT OF  
**HEALTH & WELFARE**  
DIVISION OF PUBLIC HEALTH

WIC is an equal opportunity provider.



## What They will Learn?

A balanced diet is a basic part of good health at all times in a person's life. During pregnancy, proper nutrition is even more important. Prenatal nutrition promotes the mother's well-being during pregnancy and helps ensure a healthy start for her new baby. You will be able to guide a counseling session with a pregnant WIC participant to help her make choices for achieving her goals.

## Instruction Level

Prerequisite for taking the Prenatal Nutrition Course: Basic Nutrition Course

## Items Needed for this Course

Access to the online Idaho WIC Policy Manual on the Idaho WIC website. The Idaho WIC website [wic.dhw.idaho.gov](http://wic.dhw.idaho.gov) houses all the online materials for staff under the Staff training page.

1. Access to WIC Works for some reading <https://wicworks.fns.usda.gov>
    - a. Tips for Pregnant Moms
    - b. Giving your baby a Healthy start: Tips for Pregnant Women and New Mothers
    - c. Food Safety and Pregnancy
  2. State of Minnesota WIC Prenatal modules: <https://www.health.state.mn.us/people/wic/index.html>
    - a. Nutrition and weight Gain During Pregnancy- 31 minutes
    - b. Diabetes and Hypertension- 22 minutes
    - c. Iron Deficiency in Women and Children- 20 minutes
- Definitions and acronyms (located under the policy manual area)
  - To save paper, you do not need to make copies of or print the policies or procedures.
  - Hemoglobin chart for cutoff values for hemoglobin levels (Activity 3) this is located in the Nutrition Risk Criteria section- Biochemical 200, nutrition risk 201 Low Hematocrit/Low Hemoglobin
  - There is BMI and weight gain information available at the website: [www.ChooseMyPlate.gov](http://www.ChooseMyPlate.gov)

## Recommended Time

- Approximate time it takes to read resources and complete Modules: 2-3 hours
- Approximate time it takes to complete the face-to-face activities and discussion: 2-3 hours

## Module 1: Introduction to Prenatal Nutrition- WIC Works



### Activity 1

1. COMPETENCY:

- a. Describe recommendations for physical activity during pregnancy.
- b. Describe known health risks of smoking, drinking alcohol, and consuming illegal drugs during pregnancy.

Mock Scenario: You are certifying a pregnant participant who is 15 weeks gestation. You ask her about activities she has been doing while pregnant and she tells you she walks and rides her horse.

1. How much exercise is recommended? Found on the "Tips for Pregnant Moms"

30 minutes

2. What types of exercise is recommended? "Tips for Pregnant Moms"

Walking, swimming, dancing, gardening

3. How do you respond to the participant about the exercise she currently does? "Tips for Pregnant Moms"

Possible responses:

- It sounds like you are staying active during this pregnancy. What have you heard about physical activity during pregnancy?
- You are working hard to remain active during your pregnancy.
- What has your doctor told you about the types of physical activity you are doing?
- I applaud your efforts to exercise.
- It's wonderful you are getting some exercise.
- It sounds like exercising is important to you.
- It's important to avoid activities with a high risk of falling or injury.

Questions on Smoking, Substance abuse, and illegal drugs during pregnancy:

1. Describe known risks for consuming illegal drugs during pregnancy. "Give your Baby a Health Start: Tips for Pregnant Women and New Mothers."

Possible Responses:

- Be born too small, too early, or stillborn
- Be born addicted to drugs
- Have a birth defect, deformities, or trouble breathing
- Have learning, behavioral, or other health problems throughout life

2. Should women quit smoking and drinking? Give reasons for each category. "Give your Baby a Health Start: Tips for Pregnant Women and New Mothers."

Possible Responses:

- Smoking-
  - Be born too small or too early
  - Be stillborn or die during infancy
  - Have breathing problems or trouble sleeping
  - Have behavioral problems later in life
- Alcohol-
  - Birth defects such as a deformed face
  - Problems seeing or hearing
  - Trouble learning
  - Mental and behavioral issues

3. What should a mother do if she is taking a prescription drug after finding out she is pregnant? "Give your Baby a Health Start: Tips for Pregnant Women and New Mothers."

Possible Responses:

Ask before taking medicines.

Only take medicine that the MD says is safe.

## Module 2: Nutrition and Weight Gain During Pregnancy

Note: The activity for this module is with 3.

## Module 3: Medical Risks



### Activity 2 & 3

#### COMPETENCIES:

1. Describe how folate, iron, and water can impact a woman's health during pregnancy.
2. Understand how to prevent potential nutrition-related concerns during pregnancy, including mercury poisoning, pre-eclampsia and gestational diabetes.
3. Understand why there are potential medical risks during pregnancy related to closely spaced pregnancies, pica, teen pregnancy, and pregnancy with multiples.

#### Activity 2: Prenatal Nutrition Concerns

1. Why is Mercury harmful to the unborn fetus?
  - Mercury can affect the developing fetus' brain and nervous system.
2. Give three examples of pregnancy-related concerns with a greater impact during the teenage years.
  - Increased requirements for nutrients related to growth (calcium, phosphorus, zinc, magnesium)
  - Higher risk for premature birth
  - Higher risk for low birth weight baby

#### Activity 3:

#### COMPETENCY:

1. In a case study format, assess prenatal weight gain, biochemical and clinical status, and dietary risks for a pregnant participant.

Mock Scenario: A pregnant woman, Andrea, comes into your WIC clinic for her health check appointment. You find out the following information about her:

Age: 30 years old

Height: 5'6"

Pre-pregnancy weight: 175 pounds

Pre-pregnancy BMI: 28.2

Weight at 8 weeks gestation: 177 pounds

Weight at 20 weeks gestation: 189 pounds

Weight at 28 weeks gestation: 198 pounds

Current weight: 198 pounds

She is 28 weeks pregnant today

Hgb: 10.1 g/dl, non-smoker

Andrea tells you:

- Does not eat vegetables
- Eats out 5x/week, and typically orders fried foods
- Drinks 1 cup milk/day and no other dairy products
- No prenatal vitamin or other vitamin supplement

Trainer Note: Before having the Learner answer questions below, show them where the Nutrition Risk Criteria section is located on the WIC website.

### Assessment:

1. Andrea's pre-pregnancy BMI is considered: underweight, normal, overweight, or obese?
  - overweight
2. What is the amount of weight gain thus far during this pregnancy?
  - 23 pounds

Trainer Note: Help the learner locate and print the appropriate Prenatal Weight Gain Chart in the online Idaho WIC Policy Manual, Computer-Down Kit section. Have the learner graph Andrea's weights on the appropriate Prenatal Weight Gain Chart to assist with understanding anthropometric assessment.

3. What are her anthropometric (weight related) nutrition risk criteria? (refer to the online Nutrition Risk Criteria section).
  - Andrea's rate of weight gain thus far is rapid considering her pre-pregnancy BMI is overweight.
  - For a pregnancy lasting 40 weeks gestation, a weight gain recommendation for an overweight pregnant woman is 15-25 pounds.
  - Andrea has 12 weeks gestation remaining and has already gained 23 pounds.

- Anthropometric nutrition risk criteria that apply are 111 Overweight Woman and 133 High Maternal Weight Gain.

4. What is her biochemical (hemoglobin or hematocrit related) nutrition risk criterion?

- Hemoglobin is below normal limits for a pregnant, nonsmoking woman at 28 weeks gestation. Hemoglobin of 10.9 g/dL or less is below the “anemia risk” cutoff value. Nutrition risk criterion 201 Low Hematocrit/Low Hemoglobin applies.

5. What potential maternal complications is Andrea at an increased risk for if she gains too much weight during this pregnancy?

Possible responses:

- Gestational Diabetes Mellitus
- Pre-Eclampsia and Hypertension
- Delivery complications (i.e. Cesarean-section)
- Increased risk of having a large gestational age baby
- Difficulty losing weight after the baby is born
- Increased risk of having a baby with a Neural Tube Defect (i.e. spina bifida)

Reference: Position of the Academy of Nutrition and Dietetics and American Society for Nutrition: Obesity, Reproduction, and Pregnancy Outcomes. J Am Diet Assoc. 2009; 109:918-927.

6. What is Andrea’s dietary (food related) nutrition risk criterion?

Possible responses:

- Excessive fat intake due to frequently eating out and choosing fried foods.
- At risk for low fiber intake due to frequent intake of fried foods (typically low in fiber) and inadequate vegetable intake.
- Inadequate Calcium intake due to eating 1 serving/day of dairy.
- Unknown whether or not she takes a prenatal vitamin.

Nutrition risk criteria 427 Inappropriate Nutrition Practices (Women) applies (specifically consuming a diet very low in calories and/or essential nutrients and inadequate vitamin/mineral supplementation recognized as essential by national public health policy).

7. After conducting a thorough assessment on Andrea, what are six suitable nutrition education topics you can offer Andrea to choose from as a focus of her appointment?

Possible responses:

- Weight gain
- Low hemoglobin
- Calcium
- Fiber

- Eating out
  - Vegetable intake
  - Prenatal vitamin
8. Locate in your clinic which nutrition education handout(s) contain pregnancy-related messages you can offer to discuss with Andrea?
- Varies by local agency

## Module 4: Special Circumstances



### Activity 4

#### COMPETENCY:

1. Describe the State and Local Agency policy and procedure for handling domestic violence situations.

Instructions: Discuss WIC's role in handling domestic violence situations.

1. Discuss with the learner domestic violence resources available for WIC participants (i.e.: shelters, safe homes, counseling services, domestic violence advocacy organizations, hotline number, etc.).

Community shelters/safe homes vary by clinic and local agency.

Women's & Children's Alliance in Idaho:

- 208-343-3688
- 24 hour Domestic Violence Hotline 208-343-7025
- 24 hour Sexual Assault Hotline 208-345-7273

National Domestic Violence Hotline: 1-800-799-SAFE (7233)

2. Discuss your Local Agency's policy and procedure for domestic violence?
  - Varies by local agency. Please verify what your Local Agency does for domestic violence situations.
3. The safety of the participant must be the first priority. What are suggestions of what to say or ask if the participant informs you she is in an abusive situation?

#### Possible responses:

- This is not your fault.
  - No one deserves to be treated that way.
  - I'm sorry you've been hurt.
  - Help is available to you.
  - Do you have a safe place to go?
  - If participant is residing in a safe place, ask, "Do you want to talk to someone about your abusive situation?"
  - Do you want a referral to a "safe house" program or hot line for abuse?
  - Is it safe to give you information on abuse to read?
4. What are some possible responses when a participant informs you she is in an abusive situation yet declines referral information?

Possible responses:

- I appreciate you sharing this with me and I can see this is something that weighs heavily on your heart. When you feel ready, I just want you to know we are always here for you to offer you support and anything else you need.
- When you feel ready, WIC is here for you.

Other questions that it is important for the staff member to know.

1. What are ways to avoid contracting the parasite that causes toxoplasmosis?
  - Have someone else handle cat litter or use gloves
  - Avoid soil or sandboxes used by cats
  - Cook meat thoroughly
  - Wash fruits and vegetables thoroughly to remove as much contaminated soil as possible
2. What are common lead sources?
  - Lead paint, soil, some ceramic dinnerware and lead crystal
3. What is pica?
  - The compulsive eating of non-food substances such as clay, dirt, baking soda, starch, ashes, chalk, coffee grounds, cigarette ashes, paint chips or large quantities of ice.
4. If a pregnant woman has pica, what is the treatment?
  - Help change eating patterns to avoid serious problems.
  - Be non-judgmental and assist mothers to understand. Ask permission to share the health risks associated with pica.

5. Why do women with closely spaced pregnancies have added risks?

It takes more than a year to replenish all the vital stored nutrients following delivery. These women need good nutrition especially if they are still breastfeeding another infant