



Trainer Edition

Arizona WIC Training

Child Nutrition Guidebook



ARIZONA DEPARTMENT
OF HEALTH SERVICES

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What Will You Learn?

While completing the Child Nutrition LMS course and this associated guidebook, you'll learn the basics of child nutrition, family meals, physical activity, and dental health.

Items Needed for This Course

- Pen or pencil
- Access to Child Nutrition LMS Course

Recommended Time

- Approximate time it takes to complete the Child Nutrition LMS course: 1-2 hours
- Approximate time it takes to complete this Child Nutrition Guidebook and discussion with your trainer: 1-2 hours

Things to Remember

- This guidebook is yours to keep.
- You are encouraged to take notes, highlight, and write in this guidebook.
- As your trainer chooses, you may work in a group or as an individual.
- You are encouraged to ask your trainer(s) for help, ask questions about the information in the course, or ask any questions about additional topics related to Child Nutrition training.

TRAINER NOTE: As a trainer, you are assessing trainees for their understanding of the Child Nutrition competencies for each module. The guidebook training activities are intended to help you assess both trainees' ability to apply basic knowledge and assess their critical thinking skills. Participation by trainees in the face-to-face activities and discussions is required in order for you to thoroughly assess their skills and level of competence.

Child Nutrition Course Instructions

- ☐ Log onto <https://www.train.org/arizona/home>
- ☐ Open and complete the Child Nutrition LMS Course module and the corresponding Child Nutrition Activities in this guidebook.
- ☐ At your trainer's direction, complete the Child Nutrition LMS Course and guidebook, either individually, with other trainees, or with your trainer.
- ☐ Complete the Child Nutrition Post-Test.
- ☐ Meet with your trainer at their direction to discuss each module of the Child Nutrition LMS Course and the associated activities in this guidebook, either after each module, or after all modules have been completed.

TRAINER NOTE:**Trainer Steps:**

- ❑ At your discretion, trainees may work in groups or as individuals.
- ❑ At your discretion, you may review answers with trainees periodically as they complete activities of this guidebook, or after they have fully completed it.
- ❑ “Possible responses” provided throughout the guidebook are suggested responses and are often not the only answers.
- ❑ If training more than one person at a time, be prepared for trainees to finish the coursework at different times. In order to have trainees review the face-to-face portions together, prepare a list of things that trainees who finish first can do during downtime (e.g., ask you questions for more clarification, check email, clinic observation, etc.).

Module 1: Child Nutrition (18 Months to 5 Years)

TRAINER NOTE: It is recommended for you to review the competencies below with trainees.

MODULE 1 COMPETENCIES:

1. Trainees will be able describe the Division of Responsibility for Toddlers through Adolescents.
2. Trainees will be able to share recommendations about child portion sizes.
3. Trainees will be able to share recommendations about offering desserts to children.
4. Trainees will be able to share recommendations about helping caregivers make mealtimes pleasant.

Module 1 Questions

1. What is the Division of Responsibility for Toddlers through Adolescents?

Correct responses:

The caregiver is responsible for what foods are offered, when food is offered, and where food is offered. The child is responsible for how much or whether to eat.

TRAINER NOTE: At your discretion, refer trainees to Module 1, Slide 3 of the Child Nutrition LMS Course for the correct answer to the above question.

2. What information can you offer to caregivers asking about portion sizes for children?

Possible responses:

- Before children are able to serve themselves, encourage caregivers to put about 1 tablespoon, per year of age, of each food on the child’s plate. Children can then request to have more of any food they want, as much as they want, until the meal or snack time ends.
- Once children are physically able to serve themselves (around 3 years of age), encourage caregivers to teach their children how to serve themselves small portions of the foods offered, and politely ask for more.

TRAINER NOTE: At your discretion, refer trainees to Module 1, Slide 10 of the Child Nutrition LMS Course for the correct answer(s) to the above question.

3. Why should desserts be limited to one serving during meals, but be allowed to be eaten in unlimited quantities during some snacks?

Possible response:

Children should be restricted to just one serving of dessert during mealtimes because if children are allowed to fill up on easy-to-like foods (such as dessert) during meals, then they won't have the motivation to try other foods that may take more time to learn to like. Occasionally offering unlimited dessert during snack times is okay because the dessert foods don't compete with other nutritious foods offered, and helps prevent sweets from becoming overly desired by children.

TRAINER NOTE: At your discretion, refer trainees to Module 1, Slide 12 of the Child Nutrition LMS Course for the correct answer(s) to the above question.

4. What recommendations would you offer to caregivers to help them have pleasant mealtimes?

Possible responses:

- Turn off all electronic devices.
- Help get their children involved in mealtime conversations.
- Encourage (but not force) children to stay at the table if they say they're not hungry
- Let children leave the table to go play quietly if they say they don't want to sit at the table any longer.

TRAINER NOTE: At your discretion, refer trainees to Module 1, Slide 15 of the Child Nutrition LMS Course for the correct answer(s) to the above question.

Module 2: Common Feeding Problems and Solutions

1. Trainees will be able to provide recommendations to caregivers who are struggling with the demands of catering to food requests.
2. Trainees will be able to provide recommendations to caregivers who are struggling with feeding "picky" eaters.
3. Trainees will be able to provide recommendations to caregivers who are struggling to get their children to eat more.
4. Trainees will be able to provide recommendations to caregivers who are struggling to get their children to eat less.

Module 2 Questions

TRAINER NOTE: Allow trainees time to read through the following activity and answer all questions. Discuss the questions together to check for understanding and consider other appropriate responses.

Directions:

Answer the following questions.

1. What tips can you offer to a caregiver struggling with the demands of catering to food requests?

Possible Responses:

- Not to ask their children, “What would you like to eat?”, but to plan meals and snacks in advance and stick to offering the foods they planned to offer
- If children have become accustomed to having meals and snacks provided on demand, encourage caregivers to regain control of their responsibility of deciding which foods to offer and what times to offer them.
- Encourage caregivers to have conversations with their children before making the transition so their children will know what to expect.
- Caregivers should maintain control of the menu until children get a little older (approximately 6 years old)

TRAINER NOTE: At your discretion, refer trainees to Module 2, Slide 4 of the Child Nutrition LMS Course for the correct answer(s) to the above question.

2. What tips can you offer a caregiver struggling with a “picky” eater?

Possible responses:

- Avoid pressure tactics by requiring children to eat all of one food before having another, or requiring a “no, thank you bite”
- Caregivers should prepare the foods that THEY enjoy during meal and snack times
- Offer familiar foods with unfamiliar foods they want children to try
- Offer easy-to-like grain foods with each meal such as bread, tortillas, pita bread, cornbread, biscuits, rice, or pasta.
- Be patient with offering foods, even if children refuse them many times

TRAINER NOTE: At your discretion, refer trainees to Module 2, Slide 6 of the Child Nutrition LMS Course for the correct answer(s) to the above question.

3. What tips can you offer a caregiver struggling with their child to try to get them to eat more?

Possible responses:

- Create pleasant eating environments.
- Trust children to eat the right amount of food for them.

TRAINER NOTE: At your discretion, refer trainees to Module 2, Slide 10 of the Child Nutrition LMS Course for the correct answer(s) to the above question.

4. What tips can you offer a caregiver struggling with their child to try to get them to eat less?

Possible responses:

- Create pleasant eating environments.
- Trust children to eat the right amount of food for them.
- Encourage caregivers to still continue to offer high fat foods such as chips, cheeseburgers, and French fries.
- Encourage caregivers to still continue to offer one serving of dessert with meals (if the caregiver wants to have dessert) but allowing unlimited servings of dessert foods at some snacks.

TRAINER NOTE: At your discretion, refer trainees to Module 2, Slide 12 of the Child Nutrition LMS Course for the correct answer(s) to the above question.

Module 3: Child Physical Activity and Dental Recommendations

TRAINER NOTE: It is recommended for you to review the competencies below with trainees.

MODULE 3 COMPETENCIES:

1. Trainees will be able to describe the Division of Responsibility for Physical Activity for Toddlers Through Adolescents
2. Trainees will be able to provide recommendations to caregivers who are struggling to get their children to exercise more.
3. Trainees will be able to provide recommendations to caregivers regarding daily dental care and frequency of dental visits.
4. Trainees will be able to provide recommendations to caregivers regarding fluoride.

Module 3 Questions

TRAINER NOTE: Allow trainees time to read through the following activity and answer all questions. Discuss the questions together to check for understanding and consider other appropriate responses.

1. What is the Division of Responsibility for Physical Activity for Toddlers Through Adolescents?

Correct Answer:

The caregiver is responsible for structure, safety, and opportunities, and the child is responsible for how, how much, and whether he or she moves.

TRAINER NOTE: At your discretion, refer trainees to Module 3, Slide 2 of the Child Nutrition LMS Course for the correct answer(s) to the above question.

2. A caregiver tells you that he wants his 4-year-old child to lose weight by being more physically active, but he cannot get his child to be that physically activity, no matter how much he tries to encourage her. He asks for your ideas. What recommendations would you share with him?

Possible Responses:

- Never try to force children to be physically active if they aren't interested.
- Instead, follow the Division of Responsibility for Physical Activity for Toddlers Through Adolescents (The caregiver is responsible for structure, safety, and opportunities, and the child is responsible for how, how much, and whether he or she moves.)
- Trust that if given plenty of opportunities, children will get the amount of physical activity that is right for them.
- Whenever appropriate, caregivers should participate in physical activities with their children.
- Provide safe places for activity that the child enjoys.
- Find fun and rewarding family activities.
- Provide children with opportunities to experiment with group activities such as sports.

- **Set limits on TV but not on reading, writing, artwork, or other sedentary activities.**

TRAINER NOTE: At your discretion, refer trainees to Module 3, Slide 5 of the Child Nutrition LMS Course for the correct answer(s) to the above question.

3. What recommendations could you share with caregivers about daily dental care, and frequency of dental visits for children?

Possible Responses:

- **Caregivers should brush their children's teeth with a pea-sized amount of toothpaste 2 times per day until the child can effectively do it themselves, often around 5 or 6 years of age.**
- **The American Academy of Pediatric Dentistry recommends that all children should also visit the dentist every 6 months.**

TRAINER NOTE: At your discretion, refer trainees to Module 3, Slide 7 of the Child Nutrition LMS Course for the correct answer(s) to the above question..

4. What recommendations could you share with caregivers about fluoride for children?

Possible Responses:

- **Fluoride containing products such as mouthwash, toothpaste help to strengthen tooth enamel.**
- **The main source of fluoride is usually from the local water supply, but not all communities add fluoride to their local water supplies.**
Children living in communities without adequate fluoride supplementation (less than 0.3 ppm) should speak with their dentist or health care provider to get more information about fluoride supplements.

TRAINER NOTE: At your discretion, refer trainees to Module 3, Slide 7 of the Child Nutrition LMS Course for the correct answer(s) to the above question.