

## APPENDIX F

Title:	VENA Video Script				
Version	January 21, 2010				
Setting	WIC office				
Actor Info	Counselor = C / Participant = P				
KEY:	Counselor = C / Participant = P				
Screen #	Video Clip Topic	Video Screen Text	On-camera Narration	Shot Direction	Editing/Instructions
Current Video Section 1 (currently, one entire video segment in 6001 section)					
V1	Opening conversation for "D" Continuity of care		<p>C: Hi Julia! How are you?</p> <p>P: Not bad, not bad...</p> <p>C: That's good! How's Angie doing?</p> <p>P: Oh, she's doing good. She's still picky though. I don't know why, but she just doesn't like to eat anything!</p> <p>C: Well in our past appointments, we've talked a little bit about Angie's eating habits and your concerns with her being a picky eater...and about grandma, the fluids. We've talked about several things.</p> <p>In the past, you've said that you weren't really concerned with her weight. Is that still true?</p> <p>P: Well, only because her dad and I are really big. So, I just figured she'd be the same way.</p> <p>C: Do you mean "big" as in "tall?"</p> <p>P: Well, heavy too.</p> <p>C: Mm-hmm.</p> <p>P: Although, you know, I guess I'm not so worried about her right now. Ummm, when I watch Angie with some of her little friends, she seems to look just like them.</p> <p>C: Mm-hmm.</p> <p>P: And, she's not really getting picked on or anything.</p> <p>C: Well, she's a tall girl!</p>	<p>VIDEO CLIP: Back in staff office. Angie playing with a toy in the background. Staff and mom sitting around desk. Staff needs to be relaxed and easy-going in her approach; matter of fact. Focus on positive tone rather than negative, punitive or judgmental. Staff shows compassion and body language/ tone of voice are all non-threatening. And finally, did you pick up on staff's body language and tone of voice? Staff was compassionate and friendly, and her</p>	<p>Staff recognizes that BMI is still elevated and child visibly overweight. Staff decides to build rapport and ask mom questions to obtain information from other assessment categories. For example; ask what a typical day for Angie is like (get sense of eating habits, physical activity, medical conditions, etc.).</p>

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V2	Counselor = C / Participant = P		<p>And looking at her growth chart, she's taller than most other little girls her age. So, it would make sense that she would weigh a little bit more.</p> <p>Something positive that we're seeing in just the couple of heights and weights that we've gotten from her is that, as she's getting taller, her weight is starting to level off a bit.</p> <p>As you can see here, she keeps following the same nice curve for her height (she's getting taller and taller), but her weight is starting to level off...</p> <p><i>(Show with hands)</i></p> <p>We call this "growing into their weight." With many kids, we want to see this happen, and it looks like Angie's starting to do just that.</p> <p>P: Well, you know, every time I come in here, the girl who weighs her is always telling me how fat she is.</p> <p>Her doctor really hasn't said anything to me about it much. So, I wonder if that's just something you read about in the news all the time. You know, about how kids are getting fat these days. To me, I still worry that she doesn't eat enough because she's so darn picky! But, if you're telling me she's doing Okay...</p> <p>C: Well she is, but let's talk about some of the changes you've made since the last time we saw her! You mentioned last time that you've cut back on the milk and juice, so that's definitely a good thing! And her iron level is getting better. Are you worried that Angie isn't getting enough food?</p>	<p>body language conveyed comfort with Angie's mom.</p> <p><i>Good way to talk about growth charts without focusing on the numbers (percentiles).</i></p>	<p>This illustrates how communication skills help to use transitions to collect information from the other assessment categories.</p> <p>Is this an appropriate use of a close-ended question? The purpose of asking this is to clarify the position of the mother as it relates to something that she stated earlier.</p> <p>Clarification is a two-way street: Despite the fact that it is a</p>

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	<p>staff // in conflict with her doctor</p> <p>Anthropometric</p> <p>Set up for Continuity</p> <p>Dietary (correcting misinformation)</p> <p>Other – Link to physical activity for healthy weight</p> <p>A – genetics / family predisposition for overweight</p> <p>E – caregiver dynamics</p> <p>O – go to park for physical activity</p> <p>Communication skill transition</p>		
			<p>P: Well I am. So you mean she hasn't gained any more weight?</p> <p>C: Well, actually, no. Angie hasn't gained any weight. In fact, she's lost a little bit of weight. But she keeps getting taller, so to me, that says she's probably getting most of what she needs because she is still growing well.</p> <p>P: So I don't have to put her on a diet or anything?</p> <p>C: Absolutely not! No dieting for little kids. Instead, what you want to do is keep her as active as possible. Keep an eye on the milk and juice because those give her some extra calories – which she does need, but not too much of...so you want to find a nice balance there.</p> <p>And, speaking of physical activity – how's she doing with that?</p> <p>P: Well, you know, my mom's pretty big too and she can't move around a whole lot. With it being nice out, she's been trying to take her out to the park, maybe once or twice a week. Angie's got some little friends she likes to meet there and most of time they get to play a bit. The last couple of weeks, I think grandma's had her out there a little more often than before.</p> <p>C: Ok, that's wonderful! And we do want to keep her as active as possible.</p> <p>This represents the editing point – the next section will be used entirely in the Dietary Assessment Module.</p>
			<p>Step in the VENA assessment process, in order to effectively communicate, you also may need to clarify information for the participant so that you can bring her along to get at the information you need from her.</p> <p>VENA promotes completing the assessment first before you do education. But, in the real world of WIC, you need to be able to take advantage of windows of opportunity to educate, but the key is to be able to redirect back to the assessment process in order to assure the completeness of the assessment.</p> <p>Physical activity information falls under the "Other" category of assessment information.</p>
			<b>Editing Instructions</b>

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V3	<p>D – WHY she is picky / better eater in some situations and not others</p> <p>Drilling down (communication skills)</p> <p>D</p> <p>A – confusion; Angie is picky eater but she is a big girl (could lead into portions in V18</p> <p>D – portion size</p> <p>Education on portion size</p> <p>D – Meal pattern</p> <p>E – caregiver dynamics/concerns about wasting food</p> <p>E + D interaction</p> <p>Critical thinking and drill down – integration....</p> <p>Example of drilling down</p>		<p>C: Let's go back and talk about your concern that Angie isn't getting enough food. Can you tell me a little more about that?</p> <p>P: Well, she just takes a couple of bites at dinner and then she tells me she's full. She never really cleans her plate.</p> <p>I mean, she's a big girl. Look at her dad and me – we're both pretty big....But, you know, I just don't think she eats enough.</p> <p>C: Ok, tell me a little bit about what a typical mealtime is like with Angie?</p> <p>P: Hmm...well, most weekdays, I work all day and then I come home and make dinner for us. Then, a lot of times she'll either be by my feet just wanting something or she's off playing. Sometimes her dad has to work the late shift so then it's harder for me to just cook for Angie and me. But when he's working regular hours we usually sit down and eat together. Sometimes he likes to turn the TV on then, and I don't know if I like that.</p> <p>Because when he does that, you know, Angie will sit at the table for a little while, but then she just wants to go watch TV. So I try to get her to eat as much as I can before I let her get up.</p> <p>C: Okay. It's great that you are teaching Angie good manners by having her sit at the table with you as a family while you eat.</p> <p>Now, when Angie refuses to eat you said you make her sit there until everybody else is done. Tell me what typically happens next.</p> <p>P: Well, I usually just give her something I</p>
		<b>Shot Direction</b>	<b>Editing Instructions</b>

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<p>D – picky eating and dynamics of family meal time.</p> <p>E – work schedule, challenges. Continuing to drill down</p> <p>D – dynamics of mealtime, parent expectation</p> <p>Dietary –</p> <ul style="list-style-type: none"> <li>• reference to portion size</li> <li>• getting more at understanding why Angle is a picky eater</li> </ul> <p>Includes some education</p> <p>E</p> <ul style="list-style-type: none"> <li>• Family dynamics</li> <li>• Dad's food preference and influence</li> </ul> <p>O – food security</p>		<p>know she'll eat, even though I think I remember hearing that that wasn't such a good thing to do. You know, I don't want to worry about her being hungry later on and I just can't stand listening to that whining so, um, I just really try to make sure that she gets something into her, even though I don't have time to make a second meal.</p> <p>C: Ok. About how often does this happen, where she doesn't eat what the rest of the family is eating?</p> <p>P: Well, pretty often. It's so hard to feed her. She just wants the same thing over and over again.</p> <p>She likes those chicken nuggets and she loves when we get pizza.</p> <p>When I make some of the food her dad and I like, like pork and sauerkraut, she may or may not eat it. Or sausages – we eat a lot of them.</p> <p>C: So, how does she react when you put those foods in front of her?</p> <p>P: Well, she only takes a bite or two, and then kind of plays with it. I really hate to throw food away. And a lot of times if she doesn't finish it, her dad or I will end up eating it, because I hate wasting food!</p> <p>We always try to get her to eat, but a lot of times she just won't eat. And she just keeps saying "I'm full, I'm full!" (Use a whiny voice when saying the quote).</p> <p>C: Ok, can you give me an idea of about how much food you offer her at dinner time?</p>			

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			<p>Let's say, for example, you were going to give her pork and sauerkraut and pierogies. Can you show me about how much you would put on her plate?</p> <p>P: Well, I'd probably cut a piece about that big <i>(demonstrates with palm of her hand)</i></p> <p>You know, about the size of my hand.</p> <p>C: Ok</p> <p>P: Um, maybe not the whole thing, maybe half. But that's such a small amount. . . .a couple of pierogies. She just doesn't eat that much.</p> <p>C: We'll talk more later about portion sizes for Angie, but a good rule of thumb is that you should offer about one Tablespoon for each year of age. It might be that you are close to that or it could be that you are offering her too much. When you give her meals and snacks, does she have her own little plate and cup?</p> <p>P: No, we just use a regular plate...</p> <p>C: That's okay, but when estimating how much to give Angie, it would help if you used a child-sized plate, even one with the little divider sections if you have one.</p> <p>P: Oh, okay. I think we have one of those somewhere. I guess I can find it and try using it again.</p> <p>C: Is it possible that Angie is eating before she comes home for dinner? Do you think that maybe grandma is giving her a snack or</p>		

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			something to eat before she comes home?
			<p>P: Well, you know, she might be, hmmm, I never really asked mom about that...cause she's looking after Angie for me and mom's sure a lot cheaper than if I had to take her to a babysitter. Money's really, really tight. And I just want to make sure I have a safe place for Angie while we are at work. I think mom might be giving her something, but I'm not sure how to talk to her about that.</p> <p>C: I could see how that would be difficult! She's your mom for one thing. And like you said, you're worried about money and having a place for Angie to go during the week. I fully understand.</p> <p>How would you describe her eating patterns on the weekends when she is not with grandma?</p> <p>P: Hmm...well it seems like that's when she eats better. And come to think of it, she doesn't seem to be quite as picky then. She'll actually try some of the things I cook. Or sometimes we'll take her out to eat as a treat, and she'll eat pretty good then.</p> <p>But, I still think she's a real picky eater.</p> <p>C: Well, Julie, I definitely hear that you are feeling challenged by how to help Angie become a better eater at mealtimes. I have some ideas that I think might be helpful. I'd like to talk with you about them now, would that be alright?</p> <p>P: Sure! (V3 took 4 minutes 12 seconds)</p>
			Shot Direction
			Editing Instructions



1 Transcription: Interview for Anthropometric Module Video (Recorded 8/19/09; Comments finalized for  
2 consideration )

3 Counselor (C): Casey, Participant (P): Shirley

4 FOLDER #1: (Introductions; recap of follow-up appointment; discuss fluids; picky eating –  
5 portions/snacks)

6 C: Hi Shirley! How are you?

7 P: Not bad, not bad...

8 C: That's good! How's Angela doing?

9 P: Oh, she's going good. She's still picky though. I don't know why, she just doesn't like to eat  
10 anything!

11 C: Really...OK, so has that changed a lot since the last appointment?

12 P: Well we've tried...well, you told me last time I need to watch how much she's drinking cause she's  
13 drinking too much?

14 C: Mm-hmm.

15 P: I know you were worried a little bit about her iron. So we've been trying to make sure she's not  
16 drinking too much. But she definitely likes her juice cup. Um, and she likes her milk.

17 C: Ok

18 P: She drinks lots of milk. But, you know, we are trying to keep it down now. We really are. So I think  
19 that's helped – it was really helpful.

20 C: Well, I'm really glad to hear that! That's great that you're trying to cut back a little bit. But you said  
21 she still really prefers the fluids?

22 P: Yeah, yeah. Well at least when she's home with me cause she's at my mom's house during the day.  
23 But when we're home, she's really not that hungry at dinnertime.

24 C: Ok. Now I see from the last time that you were here that she is with your mom all day. Is that still  
25 true?

26 P: Yeah.

27 C: And is that mainly just during the week or on the weekends as well?

28 P: Usually just during the week when her dad and I are both at work.

29 C: So she's mainly eating dinner with you during the week?

**Comment [i1]:** Open video with CPA reviewing chart notes in office BEFORE participant is called to meet with the CPA/nutritionist

**Comment [i2]:** Need to be sure Biochemical / Clinical gets covered in this video script also.

**Comment [i3]:** Need to follow-up somewhere to ask: Did you get the lead test done by the doctor? Wanted to do this to rule that out as something that might be contributing to Angela's low iron.

**Comment [i4]:** Needs to be said clearly in a questioning voice

**Comment [i5]:** Consider rewording: "I know you told me to make sure she is not drinking too much so she would eat more foods with iron but she definitely likes her juice cup."

**Comment [i6]:** This section of the transcript is all related to rapport building and follow-up on the notes/documentation from the previous visit.

30 P: Mm-hmm.

31 C: Do you notice anything different with her eating patterns on the weekends when she's not with  
32 grandma?

33 P: Hmm... well it seems like that's when she'll eat better for me. She doesn't seem to be quite as picky.  
34 But she's still a real picky eater. She never really cleans her plate. She's a little bit more likely to try  
35 things I cook. Or sometimes we'll take her out to eat as a treat, and she'll eat pretty good. I don't know  
36 – maybe she doesn't like my cooking! (laughs)

37 C: Do you know if grandma has tried to cut back on her fluids during the week?

38 P: Well I gave her the information and booklet you gave me last time and I was telling her a little bit  
39 about it. I think she's trying, but you know, when Angie gets fussy, I don't know what she does. She  
40 might just give her more juice because it's easier to do that.

41 C: Mm-hmm.

42 P: But she said that she's been trying to make sure that Angie just gets milk at breakfast and lunch.

43 C: That's great! It's definitely a step in the right direction from what we've talked about last time. It's a  
44 good thing!

45 P: Do you think I should be giving her any more fluids than that? If she's thirsty (she complains about  
46 being thirsty sometimes) – what should I give her? Should I just give her water?

47 C: Water is always good; it's not going to hurt anything. I think we had talked about trying to keep the  
48 milk and juice more with meal and snack time just to make sure she's getting food first before filling up  
49 on fluids.

50 P: Ok

51 C: The concern before was with iron too – that maybe that much milk might have been interfering with  
52 her iron level.

53 P: Ok

54 C: Is that the main concern you had since the last appointment?

55 P: Well, no (thinking). I'm still just worried that she doesn't seem to be eating enough.

56 C: Ok

57 P: It's so hard to feed her. She just wants the same thing over and over again. She likes those chicken  
58 nuggets and likes it when we get pizza. When I make some of the food for the rest of the family, like a  
59 pork roast, she may or may not eat it. Or sausages – we eat a lot of that. But, she never seems to be  
60 real hungry. And I know that last time we were in here we were talking about her weight again, and

**Comment [i7]:** Mom is putting herself down here; self-denegration – This was just ignored... Need a segway to empower mom... perhaps the WIC staff should address this and say something like – I'm sure its not your cooking... she eats better b/c eating out is a treat. Let's look at what she is eating and why she might eat better in one place rather than the other (so many dynamics besides food are likely to be the issue.

**Comment [i8]:** Environmental Category linkage

**Comment [i9]:** Need to give attention to Mom's body language and tone of voice during this part of the video.... Is Mom showing a receptive attitude here?

**Comment [i10]:** Need to make sure that in the original documentation shown that there is a relationship between iron, fluids and milk ... that this is truly a comment reinforcing of what was to be followed up on.

61 she's a big girl. But look at her dad and me – we're both pretty big so...I just didn't think there would be  
62 any other way for her. She still doesn't eat a lot. (INSERT GROWTH EXPLANATION HERE)

63 C: Let's talk a little bit about mealtimes. You say that you give her the food, but she's still pretty picky  
64 about it. Is there any way you can give me an idea of about how much food you would offer her at  
65 dinnertime? Let's say, for example, you were going to give her pork roast and mashed potatoes. Can  
66 you show me how much you would put on her plate?

67 P: Well, I'd probably cut a piece about that big (demonstrates with palm of her hand). About the size of  
68 my hand.

69 C: Ok

70 P: Um, maybe not the whole thing, maybe half. But that's such a small amount, really. And a couple  
71 scoops of mashed potatoes. She doesn't eat that much of it.

72 C: Would you say she just takes a couple of bites, on average?

73 P: It sure seems like that! I really hate to throw away food. A lot of times if she doesn't finish it, her  
74 dad or I will end up eating it because I don't want to throw the food away. It seems like such a waste!  
75 We try to get her to eat, but she won't eat. She keeps telling me "she's full, she's full".

76 C: Is it possible that she's eating before she comes home for dinner? Do you think grandma is giving her  
77 a snack or something to eat before she comes home?

78 P: Well, she might be, I never really asked her about it...cause she's looking after Angela for me and  
79 she's a lot cheaper than if I took her to a babysitter. Money's really, really tight. And I just want to  
80 make sure I have a place for Angie. I think she might be, but I'm not sure how to talk to her about that.

81 C: I could see how that would be difficult. She's your mom for one thing. And like you said, you're  
82 worried about money and having a place for Angie to go during the week. So I could see how that would  
83 be a little difficult!

84 P: Should I tell her to stop that, or...?

85 C: Well, it may that Angie is just eating a little too much before she comes home. We may not need to  
86 stop a snack at grandma's, but maybe watch a little more of how much grandma is giving her right  
87 before she comes home. Do you think it might be easier to say to grandma – "go ahead and give her a  
88 snack, but scale back the amount?" Would that make it easier than telling her to stop completely?

89 P: (thinking) Yeah, maybe that or see if Angie can go without it. Otherwise, I suppose we could try just  
90 giving her less. I guess I just need to ask her that question. We could try doing that.

91 C: It may be something to consider because from what you've told me, Angie's appetite seems to be a  
92 little better on the weekends compared to during the week. So it could just be a matter of portion sizes.  
93 And we can talk about realistic portion sizes for kids today.

**Comment [SHS11]:** Would not want to show staff that it is necessary to go into a long-winded explanation of growth charts, but rather describe, summarize at high level whether there are any concerns with Angela's rate of growth. That should be the message we emphasize.

**Comment [SHS12]:** Need to restate the urge to insert education into the course of the assessment. If it were me handling this situation, I would suggest that we might want to talk about realistic portion sizes, so you can let mom know by giving her a 'teaser', if you will, but also say, let's come back to that in a minute and continue with the assessment. We need to model that kind of behavior for WIC staff.

**Comment [SHS13]:** Same as above comment.

**Comment [SHS14]:** This illustrates my point exactly. It may not be a matter of portion sizes... perhaps the bigger issue is the timing of feedings. One needs to be able to unveil these types of subtleties completely before providing the education. So, there are already at least three potential areas for educational contacts and goal-setting: realistic portion sizes, appropriate snack foods, and timing of snacks and meals. Somehow we will need to teach WIC staff how to work WITH the participant, ultimately, in order to set appropriate goals. All of these topics, however, should be uncovered during the course of the dietary assessment piece, and should probably go into the video piece on dietary assessment. We haven't explored completely some of the other categories yet.

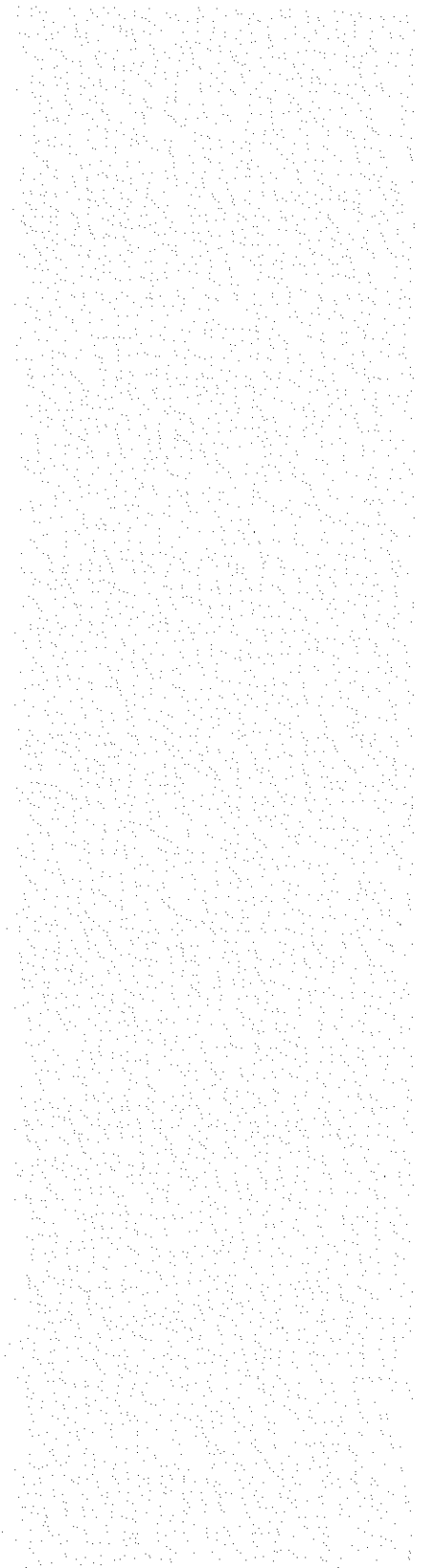
**Comment [i15]:** This is a perfect place to talk about tablespoons per year of age guide.

**Comment [i16]:** Another opportunity to reinforce tablespoons for age and what type of snacks for ideas.

**Comment [i17]:** Add that it could also be a matter of WHEN she is eating snacks or taking in fluids.

94 **BREAK**

95



96 FOLDER #2: (Explanation of growth, fluids, hgb)

97 C: We've been talking a little bit about Angela's eating habits and your concerns with her being a picky  
98 eater. ....about grandma, the fluids, etc. You mentioned you weren't really concerned with her weight  
99 at this time. Is that true?

100 P: Well, only because her dad and I are really big. So, I just figured she'd be the same way.

101 C: Do you mean "big" as in "tall?"

102 P: Well, heavy too.

103 C: Mm-hmm.

104 P: Although I'm not so worried about her right now. I watch her with some of her little friends and she  
105 seems to look just like them.

106 C: Mm-hmm.

107 P: She's not really getting picked on or anything.

108 C: Well, she is a tall girl! Looking at her growth chart, she is taller than most other little girls her age. So  
109 it would make sense that she would weigh a little bit more. Something positive that we're seeing in just  
110 the couple of heights and weights that we've gotten from her is that as she's getting taller, her weight is  
111 actually starting to level off a bit. With the last couple measurements we've gotten, she keeps following  
112 the same nice curve for her height (she's getting taller and taller), but her weight is starting to level off  
113 (show with hands). We call this "growing into their weight". With many kids, we want to see this  
114 happen, and it looks like Angela's starting to do that. And let's not forget the changes since last time  
115 we've seen her! You've cut back on the milk and juice, so I'm sure that's helped out. That's definitely a  
116 good thing!

117 P: Well, you know, every time I come in here, the girl who weighs her is always telling me how fat she is.  
118 Her doctor really hasn't said anything to me about it much. I wonder if that's something you read about  
119 in the news all the time. About how kids are getting fat. To me, I still worry that she doesn't eat enough  
120 because she's so darn picky! But, if you're telling me she's doing Ok...has she gained anymore weight?

121 C: She hasn't gained any weight. In fact, she's lost a little bit of weight. But she keeps getting taller, so  
122 to me, that says she's probably getting most of what she needs because she's still growing. Like I said,  
123 her weight is starting to level off, which is a good thing now. And we would want to see a similar  
124 pattern to this every time she comes in for her heights and weights.

125 P: So I don't have to put her on a diet or anything?

126 C: Absolutely not! No dieting for little kids. Instead, what you want to continue to do is keep her as  
127 active as possible. Still try to put a cap on the milk and juice because it's giving her extra calories –

128 which she does need, but not too much of...so you want to find a nice balance there. Speaking of  
129 physical activity – how is she doing with that?

130 P: Well my mom's pretty big too and she can't move around a whole lot. With it being nice out, she's  
131 been trying to take her out to the park once or twice a week maybe. She's got some little friends she  
132 likes to meet there and they get to play a little bit. I think her grandma's had her out there a little more  
133 often than before.

134 C: Ok

135 C: That's wonderful! We do want to keep her as active as possible. While we're on the subject of  
136 numbers ...her iron is good, it's definitely improved since the last visit. Again, I would probably attribute  
137 some of that to cutting back on the milk and juice a little bit.

138 P: That would do it?

139 C: Well, if she was getting way too much milk, it could have possibly interfered. Combined with not  
140 eating enough iron rich foods...

141 P: Like the cereals you guys give us?

142 C: Yes!

143 P: I know, I was telling my mom about that, that it would be a good thing for her to eat more of those  
144 cereals. Usually she does good with that.

145 C: That's great! Like I said, it really seems like the things you've changed since the last appointment are  
146 working out really well for Angela. We're seeing a lot of positive changes with her height, weight and  
147 iron! Those are all good things!

148 P: Maybe I don't have to worry about her not eating as much.

149 C: Let's go back and talk about that for a minute. Let's talk more about how much she's eating; what  
150 mealtimes are like for you, at home and dinnertime...

151 **BREAK**

152

**Comment [i18]:** Could use this as a quick opportunity to provide other ways to keep Angie active and to emphasize that keeping her active is also an important thing for her overall health.

**Comment [SHS19]:** While I recognize that the natural urge is to use this as another window of opportunity for teaching, we have to be careful to model complete assessments so that we may prioritize topics for education towards the end. Summarizing the encounter will be an incredibly important piece for this video. It will hopefully lead us to how to do a good documentation of what was uncovered during the assessment, as well as how to communicate what has not been able to be included in this educational contact (in other words, ideas for future topics to discuss).

**Comment [SHS20]:** I am interested in knowing how you think we should handle the whole issue of genetics and growth. I certainly would like to believe that we need to acknowledge that Angie does have genes for being on the bigger side, but that somewhere along the way, mom and dad should not assume that she will have problems automatically because of her genetics. In other words, somehow I'd like to impart that this is even more of a reason for mom to work on helping Angie develop better eating habits now, especially about how to make healthier choices, and that Mom can play a role in helping her daughter, even if she herself didn't have that opportunity. I know this delves into the whole parenting skills issue, and the Elyn Satter model for roles and responsibilities of parent and child feeding practices, so that is another potential topic for education.

**Comment [i21]:** Interfered with what? Need an object here. Too far away from reference noun. Is this interfered with 'iron level or iron intake'?

**Comment [i22]:** Again – need to give more ideas about other foods that are iron rich (even if WIC is not providing).

**Comment [i23]:** Move back into holistic view of snacks, portion size, mealtimes... lead into giving more concrete ideas.

153 FOLDER #3: (Dentist; picky eating – mealtime behavior)

154 C: We've been talking about how Angela used to drink lots and lots of juice but you've been gradually  
155 cutting back on it, which is good. Now what are your plans for getting Angela to a dentist? Have you  
156 thought about that?

157 P: Oh geez, you know I didn't even think about that. Um, I haven't found a dentist yet. I had one a  
158 long, long time ago...Is this the right age? I didn't know if I should start doing that with her yet. Is she  
159 too young?

160 C: No, this is great age! And just considering, like I said, that she had previously been drinking a lot of  
161 fluids that had sugar in them which might promote cavities. It might not be a bad idea to consider.

162 P: Yeah, I think I better look at that...

163 C: I can certainly give you referral information. Just make sure you remind me before the end of the  
164 appointment.

165 P: Oh Ok, that would be good.

166 C: Now, I'd like to go back to this whole "picky eating" thing because it seems like that's pretty much  
167 the major concern that you have. So, I have the forms that you've filled out and everything looks pretty  
168 good. I just want to clarify a couple of different things. The first would be – would you mind telling me a  
169 little bit about what a typical mealtime is like with Angela? In other words, does she normally sit at the  
170 table to eat or someplace else? Tell me about how she reacts when you put certain foods in front of  
171 her. Things like that...

172 P: Hmm...well, I work all day and then I come home and make dinner. Then, a lot of times she'll either  
173 be by my feet all the time just wanting something or she's off playing. We try to make sure we sit down  
174 and eat. And right now, it hasn't been too hard because my husband and I are home at the same time.  
175 But sometimes he has to work the late shifts so then it's harder for me to just cook for Angie and I. But  
176 when he's working regular hours we usually sit down and eat together. Um, sometimes he likes to turn  
177 the TV on and I don't know if I like that.

178 C: OK

179 P: But then, you know, Angie will sit for a little while but then she gets bored and wants to run around.  
180 But we try to make sure she sits. If she doesn't eat her food, I just make her sit there until everybody  
181 else is done or she's done too. I try to get her to eat as much as I can before I let her get up.

182 C: OK. We'd already talked before about how much food you typically give her. Does she have her own  
183 little plate and cup, or do you typically give her the same thing you would give for the rest of the family?

184 P: No, we just use a regular plate.

185 C: A regular sized plate?

**Comment [SHS24]:** This is the O category. We will need to include this part in the first video clip. It is an example of providing yet another of WIC's benefits. ...the referral process. I like how C states how that will be addressed before the end of the appointment. Again, it's an assessment point. "Oh! Mom hasn't taken her to a dentist yet... WIC CPA should be thinking "Red Flag!" Need to make a referral!"

186 P: Mm-hmm.

187 C: Now, when Angie refuses to eat you said you make her sit there until everybody else is done. Have  
188 you tried anything different, or is that typically what you do?

189 P: Well, I don't want to make her something special. I think I remember hearing that that wasn't such a  
190 good thing to do. But then I have to worry about her whining about being hungry later on and I can't  
191 stand listening to that whining so, um, I just really try to make sure that she gets something into her  
192 sometimes. And then I don't have to be bothered by it later.

193 C: Ok. What are some of her favorite foods that you know you can put in front of her, and you know  
194 she's going to eat?

195 P: Hmm...chicken nuggets. She likes grilled cheese sandwiches. She can eat cheese till the cows come  
196 home (laughs).

197 C: Ok

198 P: Sometimes, mashed potatoes and pierogies. But, I think her favorite, favorite might be pizza.

199 C: Are these foods that the rest of the family prefers to eat too?

200 P: Yeah, you know, I like to eat spaghetti but sometimes she and her dad don't. So I'll make a big pot  
201 but then nobody eats it. But then, sometimes she'll want me to make those tater tot things and she's  
202 the only one that really likes those.

203 C: Can you give me an idea of how you would introduce a new food to Angie? If it's something she  
204 hasn't tried, how would you introduce it to her?

205 P: (thinking) I'll just cook it up and give it to her. Make her sit there until she eats it.

206 C: Ok. Other than the fact that Angie might refuse to eat something, is there anything else you can  
207 think of that makes it difficult for you to try to give her a new food?

208 P: Well her dad. If he doesn't like something, he won't eat it either. And then I have to throw food out  
209 which I really hate doing that.

210 C: Right.

211 P: That bothers me more than anything!

212 C: Right, you don't want to waste food. Wasting food is wasting money – I can understand that!

213 P: That's for sure! (laughs)

214 **BREAK**

215

**Comment [i25]:** Use this as an opportunity to probe for other food types – fruits, vegetables as there is little knowledge of these in Angie's diet to this point.

**Comment [SHS26]:** I'd keep it very simple here, perhaps one sentence that asks mom to talk about some of the other food groups. That would help the CPA to assess whether or not content knowledge about the various food groups is something else that needs to be provided to mom as part of a future education topic.

**Comment [i27]:** It is also wasting time – preparation time...



Title:		VENA Video Script			
Version		December 3, 2009			
Setting		WIC office			
Actor Info		Counselor = C / Participant = P			
KEY:					
Screen #	Video Clip Topic	Video Screen Text	On-camera Narration	Shot Direction	Editing Instructions
<b>Current Video Section 1 (currently, one entire video segment in 6001 section)</b>					
V1	Opening conversation for "D"		<p>C: Hi Shirley! How are you?</p> <p>P: Not bad, not bad...</p> <p>C: That's good! How's Angie doing?</p> <p>P: Oh, she's going good. She's still picky though. I don't know why, but she just doesn't like to eat anything!</p> <p>C: Well in the our past appointments, we've talked a little bit about Angie's eating habits and your concerns with her being a picky eater...about grandma, the fluids, etc.</p> <p>Earlier, you mentioned you weren't really concerned with her weight at this time. Is that still true?</p> <p>P: Well, only because her dad and I are really big. So, I just figured she'd be the same way.</p> <p>C: Do you mean "big" as in "tall?"</p> <p>P: Well, heavy too.</p> <p>C: Mm-hmm.</p> <p>P: Although, you know, I guess I'm not so worried about her right now. When I watch her with some of her little friends, she seems to look just like them.</p> <p>C: Mm-hmm.</p> <p>P: And, she's not really getting picked on or anything.</p>	<p>VIDEO CLIP: Back in staff office. Angie playing with a toy in the background. Staff and mom sitting around desk. Staff recognizes that BMI is still elevated and child visibly overweight. Staff decides to build rapport and ask mom questions to obtain information from other assessment categories. For example; ask what a typical day for Angie is like (get sense of eating habits, physical activity, medical conditions, etc.).</p>	
V2	Continuity of care  Anthropometric Assessment and discussion	Environmental			
V3	Anthro Assessment		<p>C: Well, she's a tall girl! Looking at her growth chart, she's taller than</p>		

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Screen #	Video Clip Topic and Explanation	Video Screen Text	On-camera Narration	Shot Direction	Editing Instructions
	<p>Progress – positive change over time meeting “goal” of growing into weight</p>		<p>most other little girls her age. So, it would make sense that she would weigh a little bit more.</p> <p>Something positive that we’re seeing in just the couple of heights and weights that we’ve gotten from her is that as she’s getting taller, her weight is actually starting to level off a bit. With the last couple of measurements we’ve gotten, she keeps following the same nice curve for her height (she’s getting taller and taller), but her weight is starting to level off... <i>(show with hands)</i></p>	<p>compassion and body language/tone of voice are all non-threatening.</p>	
V4	<p><b>Dietary:</b></p> <ul style="list-style-type: none"> <li>Met behavior change goal for fluids</li> <li>Reiterates picky concern</li> </ul> <p><b>Anthropometrics</b></p> <p>“confusion” – conflicting information from professionals</p> <p>Insights onto participant feeling about WIC clinic environment and staff // in conflict with her doctor</p>		<p>C: And let's not forget the changes since last time we've seen her! You've cut back on the milk and juice, so I'm sure that's helped out. That's definitely a good thing!</p> <p>P: Well, you know, every time I come in here, the girl who weighs her is always telling me how fat she is. Her doctor really hasn't said anything to me about it much. I wonder if that's something you read about in the news all the time. About how kids are getting fat. To me, I still worry that she doesn't eat enough because she's so darn picky! But, if you're telling me she's doing OK... Has she gained any more weight?</p>		<p>Gray font text would not be selected as part of video clip section shown in 6018.</p>

<b>Title:</b>		VENA Video Script			
<b>Version</b>		December 3, 2009			
<b>Setting</b>		WIC office			
<b>Actor Info</b>					
<b>KEY:</b>		Counselor = C / Participant = P			
<b>Screen #</b>	<b>Video Clip Topic</b>	<b>Video Screen Text</b>	<b>On-camera Narration</b>	<b>Shot Direction</b>	<b>Editing Instructions</b>
V5	Anthropometric Set up for Continuity		C: Well, Angie hasn't gained any weight. In fact, she's lost a little bit of weight. But she keeps getting taller, so to me, that says she's probably getting most of what she needs because she's still growing.  Like I said, her weight is starting to level off, which is a good thing now. And we would want to see a similar pattern to this every time she comes in for her heights and weights.		
V6	Dietary (correcting misinformation)  Other – Link to physical activity for healthy weight		P: So I don't have to put her on a diet or anything?  C: Absolutely not! No dieting for little kids. Instead, what you want to continue to do is keep her as active as possible. Still try to put a cap on the milk and juice because it's giving her extra calories – which she does need, but not too much of...so you want to find a nice balance there.  Speaking of physical activity – how's she doing with that?		
V7	A – genetics / family predisposition for overweight  E – caregiver dynamics  O – go to park for physical activity		P: Well, you know, my mom's pretty big too and she can't move around a whole lot. With it being nice out, she's been trying to take her out to the park once or twice a week maybe. Angie's got some little friends she likes to meet there and they get to play a bit. I think grandma's had her out there a little more often than before.		
V8	Communication skill transition  B – iron assessment		C: Ok, that's wonderful! And we do want to keep her as active as possible. While we're on the subject of numbers...  Her iron is good, it's definitely improved since		Gray font text would not be selected as part of video clip section shown in 6018.

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Version		December 3, 2009					
Setting		WIC office					
Actor Info		Counselor = C / Participant = P					
Screen #		Video Clip Topic	Video Screen Text	On-camera Narration	Shot Direction	Editing Instructions	
		possibly as influenced by D		the last visit. Again, I would probably attribute some of that to cutting back on the milk and juice a little bit. P: That would do it? C: Well, if she was getting way too much milk, it could have possibly interfered. Combined with not eating enough iron rich foods... P: Like the cereals, you guys give us? C: Yes!			
V9	How A + B is affected by D change And cooperation of grandma (E)			P: I know, I was telling my mom about that, that it would be a good thing for Angie to eat more of those cereals. Usually she does good with that. C: That's great! Like I said, it really seems like the things you've changed since the last appointment are working out really well for Angie. We're seeing a lot of positive changes with her height, weight and iron! Those are all good things!			
V10	Transition back to Dietary			P: Maybe I don't have to worry about her not eating as much. C: Let's go back and talk about that for a minute. Let's talk more about how much she's eating; what mealtimes are like, at home and dinner time...			
V11	Clinical and continuity of Care	Current Video Section 2 (currently, one entire video segment in 6001 section)					Gray font text would not be selected as part of video clip section shown in 6023.
				C: First, looking at Angie's records from the last time, I see Angie does not have any medical conditions. Is she still doing well -- any changes from last visit?			

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KEY:		Counselor = C / Participant = P			
Screen #	Video Clip Topic	Video Screen Text	On-camera Narration	Shot Direction	Editing Instructions
V12	From Folder 1 recap of follow-up appointment; discuss fluids; picky eating – portions/snacks)		<p>P: Oh no – Angie does not have any medical problems or illnesses right now.</p> <p>C: I'm glad to hear that! Now I do want to talk more about how she's eating during our last visit and today, you expressed some concerns.</p> <p>P: Well we've tried...</p> <p>And well, you told me last time I need to watch how much she's drinking cause she's drinking too much?</p> <p>C: Mm-hmm.</p> <p>P: I know you were worried a little bit about her iron. So we've been trying to make sure she's not drinking too much. But she definitely likes her juice cup. Um, and she sure likes her milk.</p> <p>C: Oh, Ok. I think those changes are making a difference because the iron level we took today shows her levels are improved. Were you able to take her in to get a lead screening by the doctor?</p> <p>P: Yes, we did get her lead levels tested and the doctor said they were fine. Angie drinks lots of milk. But, you know, we are trying to keep it down now. We really are.</p> <p>So I think that's helped – it was really helpful and I'm glad you can see that in her iron level today.</p>		
V13	D – meal pattern		<p>C: That's great you're trying to cut back. But she still really prefers the fluids, right?</p> <p>P: Yeah. When she's home with me, but</p>		

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<b>Actor Info</b>			
<b>KEY:</b>	Counselor = C / Participant = P		
<b>Screen #</b>	<b>Video Clip Topic</b>	<b>Video Screen Text</b>	<b>On-camera Narration</b>
			<p>she's at my mom's house during the day. But when we're home, she's really not hungry at dinner.</p> <p>C: Ok. Now I see from the last time that you were here that she's typically with your mom all day. Is that still true?</p> <p>P: Yeah.</p> <p>C: And is that mainly just during the week or on the weekends as well?</p> <p>P: Usually just during the week when her dad and I are both at work.</p> <p>C: So she's mainly eating dinner with you during the week?</p> <p>P: Mm-hmm.</p> <p>C: What about her eating patterns on the weekends when she is not with grandma?</p> <p>P: Hmm...well it seems like that's when she'll eat better. She doesn't seem to be quite as picky. But she's still a real picky eater. She never really cleans her plate. She's a little bit more likely to try things I cook. Or sometimes we'll take her out to eat as a treat, and she'll eat pretty good.</p> <p>C: She probably eats better because eating out is a treat. Also, developmentally at this age, it's normal for children to prefer foods they are most familiar with.</p> <p>Let's look at what she's eating and why she might eat better in one place rather than at another... We're here to help you with some of</p>
<b>V14</b>	<p>D – WHY she is picky / better eater in some situations and not others</p> <p>Drilling down (communication skills)</p> <p>Clarify information</p>		
			<b>Shot Direction</b>
			<b>Editing Instructions</b>

Title:		VENA Video Script			
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Actor Info					
KEY:		Counselor = C / Participant = P			
Screen #	Video Clip Topic	Video Screen Text	On-camera Narration	Shot Direction	Editing Instructions
			these challenges.		
V15	D – clarification continued		<p>C: Let's start with Grandma's house...</p> <p>Do you know if grandma has tried to cut back on Angie's fluids during the week?</p> <p>P: Well I gave her the information and booklet you gave me last time and I was telling her a little bit about it. I think she's trying, but you know, when Angie gets fussy, I don't know what she does. She might just give her more juice because it's easier to do that.</p> <p>C: Mm-hmm.</p> <p>P: But she said that she's been trying to make sure that Angie just gets milk at breakfast and lunch.</p> <p>C: That's great! It's definitely a step in the right direction from what we've talked about last time. It's a good thing!</p> <p>P: Do you think I should be giving her any more fluids than that? If she's thirsty (and Angie does sometimes complains about being thirsty) – what should I give her? Should I just give her water?</p> <p>C: Water is always good; it's not going to hurt anything. I think we had talked about trying to keep the milk and juice more with meal and snack time just to make sure she's getting food first before filling up on fluids.</p> <p>P: OK</p> <p>C: The concern before was with iron too –</p>		
V16	D – with bit of education about water and timing of fluids				

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Setting		WIC office			
Actor Info					
KEY:		Counselor = C / Participant = P			
Screen #	Video Clip Topic	Video Screen Text	On-camera Narration	Shot Direction	Editing Instructions
V17	D A – confusion; Angie is picky eater but she is a big girl (could lead into portions in V18)		<p>that maybe that much milk might have been interfering with her iron level.</p> <p>P: Ok</p> <p>C: Is that the main concern you had since the last appointment?</p> <p>P: Well, actually no... (thinking) I'm still just worried that she doesn't seem to be eating enough.</p> <p>C: Ok</p> <p>P: It's so hard to feed her. She just wants the same thing over and over again.</p> <p>She likes those chicken nuggets and likes it when we get pizza. When I make some of the food for the rest of the family, like a pork roast, she may or may not eat it. Or sausages – we eat a lot of that.</p> <p>But, she never seems to be real hungry.</p> <p>And last time we were in here we were talking about her weight again. She's a big girl. But look at her dad and me – we're both pretty big so...I just didn't think there would be any other way for her. But she still doesn't eat a lot.</p>		
V18	D – portion size		<p>C: Let's talk a little bit about mealtimes. You say that you give her the food, but she's still picky. Can you give me an idea of about how much food you would offer her at dinner time?</p>		



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<b>Screen #</b>	<b>Video Clip Topic</b>	<b>Video Screen Text</b>	<b>On-camera Narration</b>
			<p>Let's say, for example, you were going to give her pork roast and mashed potatoes. Can you show me how much you would put on her plate?</p> <p>P: Well, I'd probably cut a piece about that big <i>(demonstrates with palm of her hand)</i></p> <p>About the size of my hand.</p> <p>C: Ok</p> <p>P: Um, maybe not the whole thing, maybe half. But that's such a small amount. A couple scoops of mashed potatoes. She doesn't eat that much of it.</p>
<b>V19</b>	<p>D - portion size</p> <p>E -- concerns about wasting food</p>		<p>C: Would you say she just takes a couple of bites, on average?</p> <p>P: It sure seems like it! I really hate to throw away food. A lot of times if she doesn't finish it, her dad or I will end up eating it because I don't want to throw the food away. It seems like such a waste!</p> <p>We try to get her to eat, but she won't eat. She keeps telling me "she's full, she's full."</p>
<b>V20</b>	<p>Education on portion size</p> <p>D -- Meal pattern</p> <p>E -- caregiver dynamics</p>		<p>C: We'll talk more later about portion sizes for Angie, but a good rule of thumb is that you should offer about one Tablespoon for each year of age. It might be that you are close to that or it could be that you are offering her too much. <b>Something else I'd like to ask before we get into specific amounts of foods is...</b></p> <p>...is it possible that Angie is eating before she</p>
			<b>Shot Direction</b>
			<b>Editing Instructions</b>

<b>Title:</b>	VENA Video Script				
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<b>Actor Info</b>					
<b>KEY:</b>	Counselor = C / Participant = P				
<b>Screen #</b>	<b>Video Clip Topic</b>	<b>Video Screen Text</b>	<b>On-camera Narration</b>	<b>Shot Direction</b>	<b>Editing Instructions</b>
V21	E + D interaction Critical thinking and drill down – integration....		<p>comes home for dinner? Do you think grandma is giving her a snack or something to eat before she comes home?</p> <p>P: Well, she might be, I never really asked from about it, cause she's looking after Angie for me and she's sure a lot cheaper than if I took her to a babysitter. Money's really, really tight. And I just want to make sure I have a safe place for Angie. I think mom might be, but I'm not sure how to talk to her about that.</p> <p>C: I could see how that would be difficult. She's your mom for one thing. And like you said, you're worried about money and having a place for Angie to go during the week. So I could see how that would be a little difficult!</p> <p>P: Should I tell her to stop that, or...?</p> <p>C: Well, it may that Angie is just eating a little too much before she comes home. We may not need to stop snacks at grandma's, but maybe watch a little more of how much grandma is giving her right before she comes home.</p> <p>Do you think it might be easier to say to grandma – "go ahead and give her a snack, but scale back the amount?" Would that make it easier than telling her to stop completely?</p>		
V22	E & D		<p>P: <i>(thinking)</i></p> <p>Yeah, maybe that or see if Angie can go without it. Otherwise, I suppose we could try just giving her less. I guess I just need to ask mom that question. We could try doing that.</p>		

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<b>KEY:</b>	Counselor = C / Participant = P				
<b>Screen #</b>	Video Clip Topic	Video Screen Text	On-camera Narration	Shot Direction	Editing Instructions
<b>Current Video Section 3 (currently, one entire video segment in 6001 section)</b>					
<b>V23</b>	<b>FOLDER #3:</b> (Dentist; picky eating – mealtime behavior)				
	O – referral and education		<p>C: It may be something to consider because from what you've told me, Angie's appetite seems to be a little better on the weekends compared to during the week. So it could just be a matter of portion sizes. And later we can talk about realistic portion sizes for kids.</p> <p>C: We've been talking about how Angie used to drink lots and lots of juice but you've been gradually cutting back on it, which is good. Now what are your plans for getting Angie to a dentist? Have you thought about that?</p> <p>P: Oh geez, you know I didn't even think about that. Um, I haven't even found a dentist for myself yet. I had one a long, long time ago...</p> <p>Is this the right age for Angie? I didn't know if I should start doing that with her yet. Is she too young?</p> <p>C: No, this is great age! And just considering, like I said, that she had previously been drinking a lot of fluids that had sugar in them which might promote cavities, it might not be a bad idea to consider.</p> <p>P: Yeah, I think I better look into it...</p> <p>C: Well, I can certainly give you referral information. Just make sure you remind me before the end of the appointment.</p> <p>P: Oh Ok, thanks, that would be good.</p>		
<b>V24</b>	O – referral and education				
<b>V25</b>	Example of drilling		C: Now, I'd like to go back to this whole		

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<b>KEY:</b>	Counselor = C / Participant = P		
<b>Screen #</b>	<b>Video Clip Topic</b>	<b>Video Screen Text</b>	<b>On-camera Narration</b>
	down D – picky eating and dynamics of family meal time. E – work schedule, challenges.		<p>“picky eating” thing because it seems like that’s pretty much the major concern that you have. So, I have the forms that you’ve filled out and everything looks pretty good. I just want to clarify a couple of different things.</p> <p>The first would be – would you mind telling me a little bit about what a typical mealtime is like with Angie? In other words, does she normally sit at the table to eat or someplace else? Tell me about how she reacts when you put certain foods in front of her. Things like that...</p> <p>P: Hmm...well, I work all day and then I come home and make dinner. Then, a lot of times she’ll either be by my feet all the time just wanting something or she’s off playing. We try to make sure we sit down and eat. And right now, it hasn’t been too hard because my husband and I are home at the same time. But sometimes he has to work the late shifts so then it’s harder for me to just cook for Angie and I. But when he’s working regular hours we usually sit down and eat together. Um, sometimes he likes to turn the TV on and I don’t know if I like that.</p>
V26	Continuing to drill down D – dynamics of mealtime, parent expectation		<p>C: OK. It is great that you are teaching Angie good manners by having her sit at the table with you as a family while you eat, and that you are working with her to stay at the table while others are finishing their meal.</p> <p>P: But then, you know, Angie will sit for a little while but then she gets bored and wants to run around. But we try to make sure she sits. If she doesn’t eat her food, I just make her sit there until everybody else is done or she’s done too. I try to get her to eat as much as I can before I let her get up.</p>
			<b>Shot Direction</b>
			<b>Editing Instructions</b>

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V27	Dietary – <ul style="list-style-type: none"> <li>• reference to portion size</li> <li>• getting more at understanding why Angie is a picky eater</li> </ul> Includes some education		<p>C: OK. We'd already talked before about how much food you typically give her. Does she have her own little plate and cup, or do you typically give her the same thing you would give for the rest of the family?</p> <p>P: No, we just use a regular plate.</p> <p>C: That's okay, but it might help when estimating how much to give Angie if you used a child-sized plate, even one with the little divider sections if you have one.</p> <p>P: Oh, ok, we have one and I could try using it again.</p>		
V28	D + E – family dynamics		<p>C: Now, when Angie refuses to eat you said you make her sit there until everybody else is done. Have you tried anything different, or is that typically what you do?</p> <p>P: Well, I don't want to make her do something special. I think I remember hearing that that wasn't such a good thing to do. But then I have to worry about her whining about being hungry later on and I can't stand listening to that whining so, um, I just really try to make sure that she gets something into her sometimes. I really don't have time to make a second meal.</p>		
V29	D – favorite foods		<p>C: Ok. What are some of her favorite foods that you know you can put in front of her, and know she's going to eat?</p> <p>P: Hmm...chicken nuggets. And she likes grilled cheese sandwiches. She can eat cheese till the cows come home (laughs).</p>		

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V30	E – influences on feeding decision		<p>C: OK</p> <p>P: Sometimes, mashed potatoes and pierogies. But, I think her favorite is pizza.</p> <p>C: Are these foods that the rest of the family prefers to eat too?</p> <p>P: Yeah, you know, I like to eat spaghetti but sometimes she and her dad don't. So I'll make a big pot but then nobody eats it. But then, sometimes she'll want me to make those tater tot things and she's the only one that really likes those.</p>		
V31	D <ul style="list-style-type: none"> <li>• education on food preferences</li> <li>• Strategies for introducing new foods and probing on this</li> </ul>		<p>C: Don't give up on offering the spaghetti and other foods to Angie. Just encourage her to try a bite. It actually can take between 10-20 times of trying a food before it becomes familiar enough to a child so that they can judge whether or not they truly like or dislike it. Can you give me an idea of how you would introduce a new food to Angie? If it's something she hasn't tried, how would you introduce it to her?</p> <p>P: (<i>thinking</i>) I'll just cook it up and give it to her. Make her sit there until she eats it.</p>		
V32	E <ul style="list-style-type: none"> <li>• Family dynamics</li> <li>• Dad's food preference and influence</li> </ul>		<p>C: Ok. Other than the fact that Angie might refuse to eat something, is there anything else you can think of that makes it difficult for you to try to give her a new food?</p> <p>P: Well her dad. If he doesn't like something, he won't eat it either. And then I have to throw food out which I really hate doing that.</p>		
	O – food security				

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V33	Continuity of Care – synthesis and transition to education		<p>C: I definitely hear that you are feeling challenged by how to help Angie become a better eater at mealtimes. I have some ideas that I think might be helpful that I'd like to talk with you about now, would that be alright with you?</p> <p>C: Right.</p> <p>P: That bothers me more than anything! It's just money down the drain.</p> <p>C: I can understand that! Wasting food is wasting money.</p> <p>P: That's for sure! (laughs)</p>		
Potential Video section 4 (narration can be moved down to this area to form another video clip)					
V34					
V35					
V36					
Potential Video section 5 (narration can be moved down to this area to form another video clip)					
V37					
V38					
V39					
Potential Video section 6 (narration can be moved down to this area to form another video clip)					
V40					
V41					
V42					
Potential Video section 7 (narration can be moved down to this area to form another video clip)					
V43					
V44					
V45					

Pronunciation Guide: (client's phone number - office: cell: )

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