

Inside

the life of a

Public Health Dietitian

Corrine's morning began with a talk about picky eaters. She was a guest speaker at a Public Health program that helped low-income parents provide the best nutrition for their children. They met twice a month, and the topic for each meeting was selected by the participants themselves. The speaker at the last meeting was from Public Works to talk about drinking water. Many of the group were newcomers to Canada, and some of them were using scarce resources to buy bottled water, thinking tap water not safe to drink. This week, Corrine noticed, no one had brought in store-bought water.

The parents had assembled by 9:30, keen to hear what they might do about their picky eaters. Corrine began by pointing out that parents often acted like short-order cooks: as soon as a child announced, "I'm not eating



that", there would be a dash into the kitchen to make something else. Heads nodded appreciatively. So she talked about different approaches. Involving kids in cooking a meal sometimes took a little longer, but had great benefits. Presentation was also important – food could be cut into different shapes, or used to make faces or pictures on the plate. And it always helped reassure a child if you ate some of the food first.

After today's meeting a \$10 food voucher would be handed out, so Corrine and the group talked about how to get the best food value with it. She knew that the temptation when food security was an issue was to buy staples like rice or potatoes. So they looked at what \$10 could buy, and they talked about alternatives such as dried beans and vegetables.

At the end of the session



Corrine handed out the vouchers. The last woman to receive one started blessing Corrine and praying for her with tears in her eyes. It turned out that she hadn't a penny in her pocket, and would be picking her children up from school in a few hours and had nothing to feed them. Back home no one's children would go hungry, but here, as a new immigrant without family, she felt all alone. The \$10 voucher came as a godsend. Corrine took the woman's number and assured her that more help could be found.

Corrine packed up and headed off for her first one-on-one meeting of the afternoon. As a Public Health dietitian she was kept busy on a number of fronts. She trained community nutrition assistants to run programs for caregivers of small children in different ethnic communities; she worked with teams providing outreach nutritional programs to at-risk communities; she helped Public Health nurses with nutritional aspects of some of their programs; and she worked one-on-one with pregnant women who were assessed to be at risk for having a low birth weight baby.

Her first appointment was with a young woman whom she had met with a few weeks ago. That first meeting had not gone terribly well. The woman had asked if they could meet at a fast-food outlet, and when Corrine arrived the woman's opening remark was, "I don't even know why I'm here – I eat well and I don't need you". If Corrine had learned anything in her years of counseling it was to suspend all judgment. So she listened to the young woman

as she discussed how stressful her life was, and slowly she began to relax with Corrine. At that point, Corrine began to explain how different and specific the development needs of a growing baby were. She gave the woman some flyers on the subject and left. When they had next talked the woman seemed more receptive, and today was prepared to meet Corrine at her home. The environment was much more conducive to learning, and the expectant mom began asking questions. They touched on a range of topics, from the importance of calcium in the diet, and of avoiding all alcohol, to where cheap or even donated things for the baby could be found, to how to use food certificates. At the end of the session, the woman thanked Corrine and said she looked forward to their next appointment.

In every session Corrine always asked the moms-to-be what they had eaten yesterday. The next woman she visited admitted to having eaten an entire cheesecake the day before, on top of her three regular meals. Corrine remembered that the woman had earlier complained of heartburn, and asked if it was still bothering her. When she said it was, Corrine felt it was her lucky day. She didn't want to seem to be judging the woman's cravings – but now she merely explained that heartburn was aggravated by fatty foods, and her point was made.

“ One of the moms she had visited every month for five months had dropped by with her new baby. The mother was beaming with pride ... ”

When Corrine got back to her desk at the end of the day to catch up on paperwork, she had an unexpected visitor. One of the moms she had visited every month for five months had dropped by with her new baby. The mother was beaming with pride, and when the baby let out a little peal of laughter, Corrine realized, tired though she was, just how much she loved the work she did.

This is one in a series of fictionalized role stories sponsored by Toronto Public Health and the Ontario Public Health Association, and funded by the Ministry of Health and Long-Term Care.

For further information contact:

www.opha.ca