Touching Hearts, Touching Minds: Using Emotion-based Messaging to Promote Healthful Behavior in the Massachusetts WIC Program
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ABSTRACT
The Touching Hearts, Touching Minds initiative was funded through a 2003 United States Department of Agriculture Special Projects grant to revitalize nutrition education and services in the Massachusetts Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) Program. The 30 nutrition education materials and facilitated group counseling techniques developed through the project use the power of parent-identified emotional “pulse points” to become more influential in guiding WIC participants to practice positive eating and physical activity behaviors that lead to healthier families. Touching Hearts, Touching Minds materials and strategies have been well received and provide opportunities to transform the nutrition counseling relationship between WIC families and WIC staff. Touching Hearts, Touching Minds has changed nutrition education in Massachusetts and is influencing nutrition education across the country and beyond in numerous venues.

Key Words: emotion, nutrition, education, message, behavior (J Nutr Educ Behav. 2010;42:S59-S65.)

INTRODUCTION
Through knowledge and information gained in focus group research, the Massachusetts Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) became aware of a serious gap between the nutrition education being offered in the program and the value of the messages being given to WIC families. Mothers reported that nutrition information offered by WIC was often known and repetitive and the delivery of nutrition services did not connect with WIC parents in a motivating way. Mothers in WIC wanted to be listened to and sought to be acknowledged as good mothers. They wanted to receive real, practical ideas that were “mom tested,” and they wanted to be able to talk to other mothers as a means of learning how best to feed their families.

Similarly, nutrition staff members felt that although WIC was valued by participants, they had less confidence that the nutrition education the program provided was highly effective. Their concerns that they were not able to communicate their messages in ways that captured the attention of participants or facilitated behavior change were noted by principal investigators in a Massachusetts WIC 2001 Special Project Grant Final Report¹ as well as in WIC nutrition staff focus group reports compiled 2 years later by creative consultant Pam McCarthy (unpublished data, 2003).

It can be hard for professionals in the field of nutrition to accept hearing that long-standing methods for providing nutrition education are not effective and perhaps not welcome. Although these results were somewhat unexpected and shocking, Massachusetts WIC administrators were grateful to receive such feedback, which could be useful in “revitalizing” its nutrition education messages and materials to be more effective in influencing parental attitudes toward the adoption of healthful behaviors; WIC’s nutrition education philosophy and guidance could thereby move toward an emotion-based approach to nutrition services.

AN EMOTION-BASED APPROACH
Rational thought by itself does not motivate a consumer to make a decision. Scientific research on advertising and marketing has demonstrated that people make decisions in response to anticipated emotions. These anticipated emotions, or the emotional consequences that result from making a decision, act as motivation to consume. If making the decision to consume leads to feelings of joy and pride—positive emotional consequences—one is more apt to consume the product. The negative consequences of not consuming a product,
leading to emotions such as worry and distress, stimulate a decision to consume. Emotions act as the driving force behind consumer decisions and urge for action.2,3

Although the use of emotion to affect consumer decisions has been extensively researched and employed in commercial venues, this approach had not been applied to nutrition education messages that promote acquiring and practicing positive eating, parenting, and physical activity behaviors. Parenting is a very emotional experience, yet nutrition education is often devoid of emotion and filled with facts focused on health. If advertisers have been successful in influencing consumer decisions by targeting their emotional drivers, then it is likely that WIC may be more effective in influencing healthful behaviors by taking an emotion-based approach to its nutrition education.4,5

Clearly, a “shakeup” to WIC nutrition education was needed, which would lead to significant and fundamental changes. Massachusetts WIC needed to create nutrition messages that responded to—and connected with—the needs, interests, and wants of WIC families to be more effective in creating behavior change. To achieve this goal, the Touching Hearts, Touching Minds project was launched.

TOUCHING HEARTS, TOUCHING MINDS: FORMATIVE FOCUS GROUP RESEARCH

WIC Participant Focus Groups

Thirty-six WIC moms from across the state were recruited to participate in 1 of 3 focus group discussions.8 Focus group analysis was conducted by a moderator with more than 20 years of qualitative research experience. The purpose of the focus groups was to gather reactions to and opinions about traditional WIC nutrition education materials and to prototype emotion-based materials. In addition, the focus groups were designed to help determine mothers’ emotional “pulse points,” or emotional drivers, related to health and parenting behaviors so as to better connect with WIC nutrition education messages. Pulse points are the fundamental emotional impulses—or “hot buttons”—that cause individuals to act and are critical influencers in decisions related to behavior change.

Eleven unique messages and design concepts were developed as prototypes for the focus groups. These messages combined emotional pulse points routinely used in advertising with common WIC nutrition education topics identified on WIC-Talk, a nationwide listserv for WIC staff. These prototypes were then used in focus group discussions with WIC moms to gather reactions and opinions to this new style and to identify, clarify, and confirm their emotional pulse points, as well as potential nutrition topics that resonate with mothers of young children.

Reactions to the traditional nutrition education materials were often negative. Participants were often confused about whom the traditional education materials were targeted to—the parent or the child. Cartoon-style graphics indicated that the education material was for the child, yet the information was targeted to the parent. This confusion resulted in either the disposal of the education material without the parent reading it or the parent giving it to the child for coloring. Many participants reported that they thought the materials—and interaction with the nutrition counselor and their counseling—were “bossy” and appeared outdated, impersonal, and rigid, often causing negative feelings.

Participants expressed that the new concepts found in the emotion-based prototype materials made them “think on their own.” Even after putting down the material, they kept thinking through the subject or topic. Participants commented that the use of real people versus cartoon characters meant the pieces were developed for intelligent people, and that it reassured participants that someone else has walked in their shoes. They indicated that they liked the style of communicating through stories, such as testimonials.

Additionally, the mothers had surprising reactions to several of the prototype nutrition education materials, which provided further insight into their decision making. For example, one prototype featured a pair of well-worn toddler shoes with the headline “sign of a good mom,” meaning that encouraging active, outdoor play was a positive behavior. Mothers reacted negatively to this message, some noting that good mothers would not let their children go out in dirty shoes (a sense of pride in being a parent), and many others commenting that a pair of children’s shoes on their own brought to mind fears of abduction (a need to ensure their child’s safety).

Two qualitative research methods, laddering and projective techniques, were used in focus group activities to uncover emotional pulse points common to WIC mothers. For example, participants were asked to draw an image of what they perceived to be the “perfect mom” and then describe her. After sharing, participants drew a picture of how they perceived themselves as a mom and described this image to the group. In another activity, focus group participants were asked to think ahead 30 years and write on a note card what they hoped their child would say about them and their values as a parent. The moderator used follow-up probing techniques to clarify and gather deeper emotive responses that could be attached to pulse points. The moderator not only listened to what participants said, but also made note of nonverbal cues such as body language and tone of voice. The verbal and nonverbal emotive responses were then analyzed to reveal common themes among the WIC moms who participated in the focus groups, known here as emotive pulse points. The pulse points that emerged through the analysis of responses included pride, hope for future success, and a desire to create happiness within the family: “You know, like a little girl, you always have that fairy tale that you want for a family.”

Moms wanted to feel pride in their parenting. They wanted to be respected and accepted. They wanted to feel proud of their children and feel that they did the best job possible in raising them to lead independent, productive lives. Moms repeatedly expressed pride in themselves as well as in their children. Although they submitted they were not perfect, they were confident that they provided the love and support needed to nurture strong, resilient, independent children: “I’m proud of what I teach...”
my child and how to live life on life’s terms.” “I love and I’m proud of my daughter, I hold the pressure and keep the family together and handle all the issues that come, because I’m the mom.”

Success, for themselves and their children, was identified as a primary motivator. WIC moms have hope for their children’s future—a future filled with unconditional love, success, education, confidence, hope, and joy. They wanted their children’s lives to be better than what they experienced, built on a strong spiritual foundation. They wanted to know that they are leading their children in the right direction. They wanted to know that they have been successful in giving the most they could to their child—that they have been successful as a parent:

I would say that he would say that he’s where he’s at today because his mom told him that no matter what, you can do whatever you want to do in life, you can be whatever you want to be, if you just work hard enough.

Mothers expressed the desire to feel loved, content, peaceful, calm, and joyful—all related to happiness. They wanted happiness for themselves and their families. They wanted relief from the stress and worry of daily life so they can “stop and watch” their child “do a cartwheel” and live fully in the moment.

Fear was a primary motivator of WIC moms. Focus group participants described challenging living conditions in neighborhoods influenced by crime and violence. They feared for their children’s future while expressing hope in their ability to protect and shield them from these everyday dangers, remaining optimistic about the opportunities their children will have. They sought safe havens in a dangerous world. They wanted to know that they are leading their children in the right direction:

I just want to take her and protect her from the world outside. How can you protect them when that’s where they live?

I’m their guide—their source. Just a guide to see past the dirt, the prostitutes, the drug users, I want to be their hope. Because if it’s not me, then who? The drug dealer on the street?

Messages and visuals that reinforce feelings of pride, success as a parent, hope for the future, happiness for them and their families, and security from harm were likely to be powerful in capturing the attention of parents and motivating behavior change. In comparison to traditional nutrition education materials, nutrition messages that were based on these pulse points would better resonate and connect with WIC parents.

**WIC Nutrition Staff Focus Groups**

Twenty-seven WIC staff members from across the state were recruited to participate in 1 of 4 focus groups. The investigators recruited only staff members who provide nutrition services. The same moderator analyzed the focus groups and the participant focus groups. The goals of staff focus groups were to identify the opinions of WIC educators about the current nutrition education materials, to identify opinions on the prototype nutrition education materials, and to identify the barriers and enablers in implementing a new educational approach in WIC counseling and education.

Both professional and paraprofessional nutrition educators viewed the current WIC materials favorably. When asked to identify materials they liked, most professionally trained nutrition educators chose materials they had reviewed or helped create. Paraprofessional nutrition educators reported using written materials less often than nutritionists. One nutrition assistant said: “Nutritionists use the handouts. We (paraprofessionals) mainly talk.”

Reactions from most nutrition staff indicated that the prototype nutrition education materials developed for testing fell outside of their comfort zone:

I would probably use the more direct one (traditional) because that’s what people are used to.

I think they are 2 different concepts. The older concepts tell you exactly what people want to know. This one (new concept) uses your imagination. People look at this and they are going to use their imagination, which people don’t do today. We are used to looking at stuff and having everything written out for us.

Most educators preferred the straightforward, rational approach traditionally used in WIC materials and education. Nutrition educators are trained in math and science, which stress a rational, factual approach. Moving to an emotion-based style of nutrition education and counseling may require a significant shift from the traditional training nutritionists receive to include marketing concepts and counseling strategies that focus on being persuasive.

Given the discomfort expressed by many nutritionists related to changing the style of nutrition services, project staff identified priorities for training based on emotion-based counseling methods that emphasize the need for change. They also highlighted the potential of WIC nutrition educators’ influence on changing behaviors when using techniques that better connect with WIC families. In addition, the decision was made to include some more familiar and comfortable nutrition education elements, such as bulleted lists of nutrition tips, within the design of the new emotion-based materials to facilitate their acceptance and encourage their use among WIC staff.

Project staff also used a pre-training on-line survey to determine the perceptions of nutrition staff members regarding participant behavior change, potential use of emotion-based messages and materials, and their current counseling skills. Survey findings assisted in developing a training curriculum that was responsive to the staff’s needs and interests.

**TOUCHING HEARTS, TOUCHING MINDS: THE INTERVENTION**

Emotion-based messages must aim for the heart. Along with a carefully targeted message, the graphic design must also be charged with an emotional pitch. The WIC consumers—WIC mothers and families—give
written materials only a quick glance to decide whether the information is worth their time and effort. As such, the graphic design of WIC nutrition education materials must deliver an emotional punch quickly to capture immediate attention. Based on focus group findings and determined maternal pulse points, 30 emotion-based eating, parenting, and physical activity messages in attention-grabbing graphic designs were developed for use in the pilot phase of the project.

Some of the materials included prototypes tested in focus groups, whereas others were developed as a result of focus group findings. For example, one of the materials that received positive feedback has an image of a happy baby with vegetables around the mouth and a tagline, “one of these days, the vegetables are bound to find her mouth.” This piece resonated with moms in focus groups, as they could all relate to the image and the targeted emotional pulse point, pride—pride in their parenting skills, knowing that they are doing the best they can for their child. Some of the materials morphed from prototypes that did not receive positive feedback, such as the piece with the well-worn toddler shoes mentioned in the findings from participant focus groups. This piece was redesigned to minimize the fear angle and focus on the parent’s protective role, which taps into the emotional pulse point of safety and security. To better meet the needs of the diverse cultures of WIC mothers in the pilot programs, the materials were available in both English and Spanish throughout the pilot phase.

In addition to the development of nutrition education materials, the Touching Hearts, Touching Minds project introduced the concept of facilitated group discussion as a means of providing follow-up nutrition contacts to participants during their WIC certification period. A critical finding from previous grant focus groups was the desire moms have in talking with other moms who participate in the WIC program, to learn from moms who have experienced similar challenges. Project staff also observed WIC mothers’ enjoyment in sharing their nutrition concerns and solutions with each other during the focus groups and recognized participants’ preference to receive nutrition advice from their peers. The use of participant-driven group discussion facilitated by nutrition staff became an obvious complement to the provision of emotion-based nutrition services. A tool kit was designed that provided staff with group facilitation guidance and techniques, as well as ice breakers and exercises, to use in the group setting.

Prior to the implementation of the pilot phase, WIC staff from 6 local WIC agencies, including clerical, nutrition, and supervisory staff, received training on parent-identified pulse points—the emotional drivers that cause an individual to act and react—along with training on the use of the 30 emotion-based eating, parenting, and physical activity messages. Staff members were trained on the delivery of facilitated group discussion as well as expectations of the pilot project. Although WIC nutritionists are experts in nutrition science, assessing nutritional intake, and eating and dietary behaviors, they are not as skilled in effectively communicating messages that resonate with participants’ emotions. Additional nutrition staff-specific training was provided that aimed to enhance individuals’ counseling skills to effectively use emotion to influence behavior.

All 6 local pilot agencies initiated and exclusively provided emotion-based nutrition counseling, used the 30 new emotion-based nutrition education materials, and offered facilitated group discussion by November 2004 and continued through February 2006.

TOUCHING HEARTS, TOUCHING MINDS:
EVALUATION
WIC Participant Focus Groups

Thirty-two WIC mothers from 6 participating agencies took part in a series of focus groups upon completion of the pilot phase of the project to determine the acceptance of emotion-based nutrition services in the WIC clinic setting. In addition, 16 in-depth interviews were conducted with WIC participants to determine specific opinions regarding the 30 emotion-based nutrition education materials and facilitated group discussions.

Focus group findings revealed that many of the emotion-based messages showcased in the materials resonate with WIC mothers. Messages that affirmed mothers parenting skills received favorable reactions. These materials made parents feel proud that someone had acknowledged their efforts to be good parents. Personal testimonies were found to be moving, interesting, and helpful to moms:

“I like the fact that she’s not afraid to say I messed up and say we can fix that. Every mother feels like I messed up, I’m not the only one who is having this. It’s nice when you finally see others are human.”

They found the messages honest as they came from someone who “walked in their shoes.” This style captured their hearts, was relevant, and made them think differently about familiar topics. Additionally, materials featuring recipes were well received.

“This information might be the same, but it’s true that there is a feeling that goes along with it . . . when you go to a restaurant and it’s more colorful, there are pictures and it’s just a nice place to eat. The food might taste the same in both restaurants, but it feels nicer to have better.”

Messages that did not resonate well featured messages that appeared to take “power” away from the mother. Talking and molding their children was an important part of their parental self-concept. They wanted messages that provided hope without downplaying their power:

“The woman with the mouth zipper shut, it insults me as a mother. My job is to teach my children and you zip my mouth shut. . . . and then at the bottom it just says your child can decide what and how much to eat. No, my child can’t.”

The focus groups also aimed to determine how the emotion-based materials made participants feel. Emotion-based materials should make participants feel good about themselves and their participation in WIC. Participants in WIC, like anyone
Mothers noted that the emotion-based materials made them feel as if they were not participating in a government program because the materials appeared expensive and reminded them of images they would see in magazines. Figure 1 summarizes respondent perceptions of the new emotion-based materials versus older, traditional WIC nutrition education materials. Figure 2 displays an example of an emotion-based material versus the traditional WIC nutrition education material.

Focus groups revealed that many participants welcomed the facilitated group discussions as fun ways to learn and share; participants said they enjoyed the experience. Participants noted improvement in the discussion groups over time, with initial groups uncomfortable and later ones more dynamic. Mothers liked sharing with other parents and getting practical suggestions from moms who shared similar challenges. They used terms like “great,” saying they enjoyed bouncing ideas off other moms and getting out of the house. They felt that conversations were just long enough and that they were a good investment of their time. The groups gelled quickly, leaving moms with the comfort of knowing they were not alone with their challenges.

WIC Staff Survey and Interviews

Following the pilot phase of the project, WIC staff participated in in-depth interviews and completed an on-line survey to determine their perceptions of the use of emotion-based nutrition services. Results were analyzed by a statistical analyst from the Milestone Group using SPSS. Through interviews, staff reported that the new materials that were piloted were received favorably because of their bright colors, appealing photos, and emotion-based messages. The majority of staff felt comfortable using the new materials and found most to be easy to incorporate into their counseling and education, individually and in groups. Seventy-five percent found the new materials to be “as” or “more” effective than the old materials, noting that the materials with personal testimonials, cooking and snacking tips, and recipes were received the best. Materials without “concrete” information on the back were identified as “less” effective.

In response to the post-pilot staff survey, 69% of the staff reported feeling very positive about the changes they had encountered when using the emotion-based techniques for their counseling and reported that their counseling techniques had improved after using the new materials. Staff also reported they listened more, allowing participants to lead conversations, and they tended to ask more open-ended questions versus pre-pilot.

Post-pilot evaluation findings revealed that the transition to facilitated group discussion follow-up nutrition education was viewed very positively by many staff members. They noted that the availability of groups offered the opportunity for seeing many participants at one time, easing the flow of the clinic and maximizing available clinic time. Staff members reported that the group situation was relaxed and comfortable and allowed the moms to “open up” in new ways and reveal personal experiences. Some staff members found the group environment challenging initially, citing difficulties in scheduling group discussions, concerns about offering groups with multiple language needs, and general needs for more training in group facilitation. However, increased ease in facilitating groups was gained over time and through practice.

Overall, pilot staff members were happy to be a part of the project and had experienced a significant transformation in their provision of nutrition education. At the same time, continued reservations about the newly implemented nutrition education format—facilitated group education sessions stemming from a desire to teach instead of facilitate conversations—and the impact of the new materials were noted. This project highlighted the challenges associated with making significant changes in WIC. People are slow to embrace change and often lack the full confidence to make changes.

The implementation of Touching Hearts, Touching Minds demonstrated that change—in both service delivery and style—can be difficult and uncomfortable when new techniques differ from previous training and long-term routines that are deep-seated in staff and clinic operations. This project highlighted the fact that there is a wide continuum of acceptance of change with staff; there are early adopters and late bloomers. The staff must receive support, guidance,
and mentoring to address their challenges and concerns and to adopt new skills and techniques. In addition, staff members must work together as a team to support each other through the change process, and programs need to identify the solutions that will work in their environment. Positive reinforcement and brainstorming solutions were critical to the successful implementation of a change of this magnitude in a WIC clinic.

TOUCHING HEARTS, TOUCHING MINDS: INTEGRATION INTO STANDARD WIC SERVICES

Based on feedback from the project evaluation, 33 Touching Hearts, Touching Minds materials were finalized and translated into Spanish, Portuguese, French, Russian, Chinese, and Vietnamese. Statewide implementation of the project occurred in January and February of 2007. The training session used a revised, comprehensive 2-day format, launched 12 selected emotion-based materials, and trained all WIC staff—including clerical and administrative staff—on the new emotion-based assessment, counseling, and education style.

The final component of Touching Hearts, Touching Minds project implementation led to the creation of an on-line version of the Touching Hearts, Touching Minds project materials and innovative nutrition education approach. This user-friendly Web site (http://www.touchinghearts-touchingminds.com) includes an overview of emotion-based services, guidance for implementing emotion-based services in individual counseling and facilitated group discussions, training tools, and printable versions of each material along with implementation tools. This Web site has maximized the transferability of the Touching Hearts, Touching Minds project and emotion-based nutrition education and services to other WIC and nutrition education programs nationwide and regularly attracts attention from the international community. To date, public health nutrition programs in 36 states across the nation have approached Massachusetts WIC to share Touching Hearts, Touching Minds nutrition education and training materials.

Ongoing follow-up training and technical assistance on the use of emotion-based nutrition services has been and continues to be provided to all local Massachusetts WIC programs. The concepts, techniques, and skills have been integrated into all new staff training and other training sessions offered to staff. Emotion-based nutrition education and counseling, as well as facilitated group discussions, are now core service standards of the Massachusetts WIC program.

Touching Hearts, Touching Minds was a natural partner for the launch of USDA’s Value Enhanced Nutrition Assessment (VENA) initiative, facilitating VENA’s implementation alongside the delivery of participant-centered nutrition education services integral to Touching Hearts, Touching Minds. At present, the Massachusetts WIC Program is implementing a pilot project to further integrate the concepts of emotion-based services into the nutrition assessment process courtesy of another USDA Special Projects Grant entitled Getting to the Heart of the Matter.

The Touching Hearts, Touching Minds project provided the Massachusetts WIC Nutrition Program with the opportunity to implement fundamental changes into WIC nutrition services. This project not only developed eating, parenting, and physical activity messages that combined relevant, emotional pulse points with current nutrition science, but it also changed WIC staff perceptions of what it means to provide quality nutrition services. Although further evaluation is needed to determine the effectiveness of emotion-based services on behavior change, this project has had a positive impact on the delivery of nutrition education in Massachusetts, thereby influencing other states to consider an emotion-based approach.

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