While each year brings challenges to the WIC Program, WIC families and staff always seem to rise up to meet – and rise above – these challenges. We could have been reporting in this issue about an engaging process of federal Reauthorization for Child Nutrition programs, including WIC. It’s something that happens only every five years, an opportunity to make program improvements and build on over four decades of positive outcomes in WIC. Instead we are watching as Congress flirts with a federal shutdown and the devastation that brings, and waiting for our elected officials to disentangle themselves from political wrangling and misguided efforts to direct nutrition programs.

Despite that, California WIC participants and supporters spoke loudly and positively about how WIC Works for US in thousands of comments sent to Washington DC last month. Families expressed support for the important nutrition and breastfeeding benefits, thanks for healthy foods that stave off hunger, heartfelt appreciation for the service and commitment of WIC staff, and ideas for program improvement.

Meanwhile in communities across California, many ravaged by wildfires, WIC employees are analyzing how to maximize participation by eligible populations, remain relevant to millennial women and their families, ensure that WIC is a key partner as health care reform rolls out in their locales, and ensure their services produce positive health outcomes —the hallmark of WIC.

Follow the work of CWA, local agencies and community partners — in pages of this *WIC Watch* and over the next several years — as we work together to overcome challenges and ensure the continued success of WIC in a world of health reform, modernization, innovation and integration.

Postcards from WIC families in Glenn County and throughout California express deep gratitude for the WIC Program’s tangible and intangible benefits.
CWA Events

CWA Fall Education Events

CWA has put a new twist on what many of you knew as our Fall Management Conference. Reflecting the growing need to educate, inform, and connect with public health colleagues and legislators alike, we’re offering two education events this fall.

Capitol Education Day (October 6, State Capitol)

YOU are the faces and voices of the WIC Program, and you have lots of good reasons to tell our decision makers about the vital and high quality WIC services you are providing in communities across the state. This morning at the Capitol offers a chance to educate elected state officials about WIC’s great work, breastfeeding reforms, and ongoing initiatives, with lots of support from CWA.

WIC and maternal, child & adolescent health (MCAH) colleagues from across our state are gathering for a day of professional development and continuing education. We are excited this first-ever joint effort is finally happening!

Both California WIC and MCAH programs are coping with rapid change on many levels: technology, staffing, funding, policy, and more. Such times call for strong leadership to improve communication and collaboration, while nurturing this critical leadership and building our common knowledge and capacity, side-by-side.

Our joint education day is designed to do just that. It’s a full agenda, with topics ranging from management strategies and perinatal substance use to gestational weight gain and breastfeeding support. We hope you come away informed and inspired!

You Showed’Em: WIC Works for US

Over the summer, CWA coordinated the WIC Works for US grassroots education campaign, and we got a magnificent response: over 6,000 comments from WIC families across the state! Adults created “summer postcards” telling local legislators how WIC has helped their families, and how a change in WIC’s policies could offer even more help. Postcards also showcased some great coloring skills from WIC kids.

WIC families described their favorite fruits and vegetables, and many expressed how wonderful it is to have some financial security when it comes to their children’s nutrition. Many families commented in support of including more produce checks in WIC food packages, indicating that it would help them include fresh fruits and vegetables in meals throughout the month, rather than just for a week or two.

Mothers of infants told us all the ways that WIC had supported them in reaching their breastfeeding goals, and many reported nursing their babies for a year or more! Another issue important to families was the extension of WIC through age six, noting that kids who miss the kindergarten age cut-off are left without access to healthy foods between WIC and school, a time when nutrition is critical to development.

One thing was certainly clear: WIC families love the support they get at local WIC offices, and many of them mentioned staff by name.

View video testimonials at http://calwic.org/policy-center/wic-works-for-us-campaign. Thanks for ALL you do to make WIC Work for US!
Policy Updates

Bills, Budgets, and Guidelines: Oh My!

State Advocacy Priorities
CWA has supported a number of bills this year that focus on the health and well-being of women and their families, within the framework of improving health outcomes and reducing poverty. While the economy may be showing signs of improving, more families are falling into extreme poverty and more children become poverty statistics, especially in California. See our 2015 Bill List at http://calwic.org/policy-center/state.

CWA has also been following up on sponsored legislation from 2013, SB 502, which required hospitals to have and post an infant feeding policy. Look for the results of a survey by CWA and California Breastfeeding Coalition this fall when the hospital fact sheets are released. See related article, page 7.

Finally, CWA has been focusing on issues education regarding the gaps in providing breastfeeding and nutrition counseling and support services required in the ACA Preventive Services health plan benefits. Mothers report problems accessing quality breastfeeding support and pumps and access to nutrition counseling for obesity risk is not available. Look for continued efforts in 2016 on this issue.

Federal Budget Challenges
Serious problems exist with the lack of a 2016 federal budget and (at press time) threat of a government shutdown. In the midst of the announcement of House leadership changes, agreement is urgently needed on a spending plan and various iterations of a Continuing Resolution and Omnibus Appropriations are being proposed. With the last shutdown being just two years ago, the memories of shuttered services and furloughed workers are crystal clear. For WIC, even the threat of a shutdown causes havoc, impacts caseload and services, and local agencies feel the impact long after the government reopens for business. For families needing help with food provisions, they must scramble and hope they can find other sources of food.

Child Nutrition Reauthorization Delays
WIC staff and supporters wait expectantly, every five years, for the Child Nutrition Reauthorization (CNR) process, an opportunity to improve the WIC program and build on its many successes. Unfortunately, the process (at press time) is indefinitely delayed, with no firm date in sight for the final hearings, originally scheduled for mid-September. Much of this delay is due to efforts to circumvent the scientific recommendations of the Institute of Medicine regarding the content of the WIC food packages and the nutritional evidence for the recommendations, in addition to wrangling over provisions and guidelines in the National School Lunch Program, also a part of the CNR.
Many would say Californians have a lot to celebrate regarding the quality of maternity care across the state. While the United States grapples with an overall maternal mortality rate of 22%, California prides itself on a rate of only 7.3%, on par with some of the best international benchmarks. This was no small feat for a state that is arguably a diverse nation unto itself and had a maternal mortality rate of 14% as recently as 2008. Much of the credit goes to the California Maternal Quality Care Collaborative (CMQCC), as it took a multi-stakeholder approach to developing the OB hemorrhage and pre-eclampsia toolkits which, to date, have been downloaded thousands of times in over 60 countries. California’s stunning turn-around in maternal mortality is fast becoming a national model for safety and quality in maternity care.

Nonetheless, Cesarean delivery remains the most common hospital surgery in the U.S. No one disputes that Cesarean is a lifesaving procedure, with obvious benefits to mother and baby when done under circumstances that indicate vaginal birth is no longer safe. In the U.S., where the rate of Cesarean birth has rapidly increased by 50% over a mere ten-year period, the necessity of this increase is under scrutiny.

On average in California, women giving birth for the first time and carrying term, singleton, vertex babies (known as the NTSV rate), face a 28% likelihood of Cesarean birth. Surprisingly, these seemingly lower-risk pregnancies account for the greatest increase in Cesarean rates and the variation across California hospitals is staggering. For example, “on average, women who give birth in LA hospitals are 44% more likely to have a C-section than women who deliver in the SF Bay Area.”

Furthermore, there is no indication that this higher rate of Cesarean delivery has improved outcomes for American women. In fact, just the opposite is true. For most low-risk NTSV births, Cesarean delivery creates more risk – more hemorrhage, uterine rupture, and cardiac events, to name a few. Elliott Main, the medical director of CMQCC and the major innovator of the NTSV quality metric adopted by the Joint Commission in 2010, states: “the biggest risk of the first Cesarean is, quite frankly, the second Cesarean.” This snowball effect cannot be understated. By the third Cesarean, the risk of placenta previa nearly triples, and roughly 40% of these women with placenta previa will also have placenta accreta.

If the powers-that-be are not yet convinced that change is necessary, consider the other documented downstream effects of Cesarean delivery: psychological stress, anxiety, PTSD, and difficulty with breastfeeding. Even in an era of Baby Friendly Hospitals, Cesarean delivery remains a barrier to early breastfeeding support, delays the first feeding, and delays or completely removes early skin-to-skin contact. Since experts agree that women who receive

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Public Health Trends

Early skin-to-skin and bonding are much more likely to continue exclusive breastfeeding at three and six months postpartum,\(^8\) the increase in avoidable Cesareans is a matter of concern that extends well beyond the patient.

Finally, in an era of health care reform, it is impossible to avoid the price tag conversation. The Pacific Business Group on Health estimates that California could save hundreds of millions of dollars each year if unnecessary Cesareans were reduced.\(^3\) Consider also the working days lost due to increased recovery times and the risk of future days lost for health complications that directly impact a woman’s ability to be economically productive. If this trend is not reversed, the amount that California and the nation stand to lose in both health and economic costs is remarkable.

Impactful change does not happen in a vacuum. And single solutions, such as simply targeting the doctor’s decision-making, will not change the landscape of Cesarean delivery in California. Such a monumental shift in the very culture of maternity care requires changes at all levels of the system and nurses, patients, institutions, and payers each play a major role.

To that end, CMQCC convened the Task Force to Promote Vaginal Birth and Reduce Cesarean Delivery, consisting of doctors, midwives, doulas, quality improvement experts, public health officials, and public policy experts. Added to this already strong force for change is the California Maternal Data Center, a long-held vision of Dr. Main, that uses real-time data (within 45 days) from California hospitals to provide an unprecedented level of provider and institutional transparency. In the recent CMQCC pilot projects to reduce Cesarean delivery, when performance was disclosed, change happened rapidly.

Early on in the process, the Task Force agreed that, even with the perfect alignment of all the necessary forces to reduce Cesarean, change would be impossible unless everyone involved in birth — doctors, nurses, patients, and families alike — begins to truly value vaginal birth. For so long now, Cesarean delivery has been treated as commonplace, approached almost casually by most parties involved.

Ultimately, we must all do our part to promote a maternity culture that protects birth and the physiologic processes that lead to normal outcomes. We must cultivate a birthing culture that respects women and families as equal participants in decision-making. We must develop patience as a unique and necessary skill in obstetrics, create strong institutional support for providing evidence-based care, and remember, above all, to do no harm.

David Lagrew, MD, Holly Smith, CNM, MSN, MPH, and Nancy Peterson, MSN, RNC-OB, PNNP lead the Task Force. Elliott Main is the Medical Director of CMQCC. CWA thanks Holly Smith for contributing this article. Find CMQCC Toolkits at https://www.cmqcc.org/resources-tool-kits/toolkits.

(Endnotes)


CWA: We Work to Support Your Work

Men and Dads at WIC

Children’s fathers and important men in their lives have the opportunity to positively impact their well-being, and that has often gone unrecognized at WIC and other programs. That is now changing with more effort to include men and dads.

To promote these changes, CWA is supporting several strategies to change WIC clinic culture and practices. This December CWA will release an online toolkit for helping WIC clinics and community programs to welcome and engage men and dads. The toolkit will include ideas for program operations, clinic environment, counseling, and more. Look for an informational webinar on the toolkit and more opportunities in 2016 for implementing clinic best practices.

For years, the annual conference has been a platform for featuring best practices and that will continue. We hope to see you there in 2016 – join the conversation!

Ask the Community First: African Americans and WIC

WIC is a great program in so many ways, especially in welcoming all eligible individuals and providing needed and relevant benefits and support. Currently a statewide task force is studying the inclusion of African Americans in WIC, looking at recruitment, participation and retention. Working with a consultant, Dr. Diane Johnson, they will publish a paper later this year with their findings and recommendations for program improvements that promote inclusion of — and relevancy for — African American participation in WIC. For more information, contact Dr. Johnson, dianej@mmap.eu.com or Karen Farley, kfarley@cal-wic.org.

Muswamba Mwamba, City of Dallas Dads Peer Counselor Coordinator, Fidel Garcia and wife Graciela, City of Dallas WIC Peer Counselor, and Torey Carrick, father of a Los Angeles WIC participant, provided a moving plenary presentation on inclusion of men and dads at WIC (CWA Annual Conference 2015).

Ask the Community First Task Force Members

- Renee Alton, West Oakland Health Council
- Vanessa Castillo, Planned Parenthood of Orange and San Bernardino Counties WIC
- Brandi Gates, West Oakland Health Council
- Rebecca Gills, American Red Cross
- Wesley Hibble, County of Riverside, Department of Public Health
- Toncé Jackson, PHFE WIC
- Rossie D. Johnson, Advancing Communities Together, Inc.
- Wanda Kenlow, Watts Healthcare Corporation
- Jeanne Kettles, Alameda County WIC Regional Breastfeeding Liaison
- James Marin, San Bernardino County Department of Public Health, WIC
- Camille Medina, Delta Health Care WIC
- Brandie Nicholson, City of Long Beach WIC Program
- Patrisha Ragins, Prenatal Advantage Black Infant Health Program
- Charlene Walters, LA Bio Med

Some Ask the Community First Task Force members discuss issues related to engaging African Americans in WIC.
Breastfeeding Friendly Community Clinics

Progress continues to be made in California with more community clinics adopting policies and practices that support breastfeeding. Clinic administrators are seeking ways to staff lactation consultants, educators and peer counselors within the confines of reimbursement and staffing regulations. They’re also looking for opportunities provided by health care reform and innovations in service delivery, payment reform and workforce development.

As a result of a 2013 CDC-funded grant that focused on breastfeeding support in community clinics, a guide to assist clinics in becoming Breastfeeding Friendly will soon be released by CDPH.

To aid clinics in implementing the Steps to becoming a Breastfeeding Friendly Clinic, CWA and the California Breastfeeding Coalition are developing an online toolkit for release later this fall. The toolkit will provide tips and tools for operationalizing breastfeeding practices including scheduling, staff education, billing and reimbursement, clinic environment, referrals and more. Watch the CWA Flash for an informational webinar and updates.

Hospital Breastfeeding Fact Sheets

Since 2006, CWA and UC Davis Human Lactation Center (UCDHL) have provided annual reports and fact sheets regarding hospital breastfeeding practices and rates, using data from the CDPH Newborn Screening Form. Local health providers and breastfeeding specialists look forward to these materials that assist hospitals in making policy and practice improvements that support mothers’ infant feeding decisions and maternity care practices.

New state and county fact sheets featuring 2014 data will be released soon, likely in November. This year’s fact sheets will also include results of a survey by California Breastfeeding Coalition (CBC) and CWA of maternity hospitals regarding the availability of their Infant Feeding Policy, a requirement of CWA-sponsored legislation, SB 502.

Working together, CBC, CWA and UCDHL will work with breastfeeding specialists to develop a grassroots media campaign to announce the availability of the new fact sheets. Want to be involved as a media spokesperson? Contact Robbie Gonzalez-Dow, robbiegd.cbc@gmail.com, or Sarah Diaz, sdiaz@calwic.org.
Save the Dates!

CWA and a committee of your peers are already planning the program for the 2016 CWA Annual Conference and Trade Show, April 17-20 at the Town & Country Resort in San Diego. We “aim” to provide the quality experience you’ve come to expect. Come for dynamic keynote speakers and dozens of thought-provoking continuing education workshops in four professionally-relevant tracks. In between, you can focus on wellness while networking with your WIC and public health colleagues serving women and young families. And don’t forget the products and information – not to mention fun – provided by scores of exhibitors in our Trade Show!

Mark your calendars now, and keep an eye on the www.calwic.org Events webpage for more information. Registration opens November 1!

Mother-Baby Friendly Workplace Award

Every year, the California Breastfeeding Coalition honors select companies with the Mother-Baby Friendly Workplace Award for implementing policies and practices that support breastfeeding in the workplace. Last May, Community Medical Centers, Inc. WIC received this award for creating a supportive atmosphere for employees to continue breastfeeding upon returning to work, just as they promote breastfeeding with the WIC participants they serve. Lactating employees can also access a breastfeeding lounge, electric breast pumps, and staff trained in breastfeeding support.

Said one CMC employee, “Returning to work after having a baby can be stressful, but the great support I received at CMC WIC made it a little easier to exclusively breastfeed all 3 of my children.” WIC staff point to research on the positive return on investment for employers that support breastfeeding employees, including reduced absenteeism, health care costs, and turnover, as well as improved productivity, loyalty and morale. Way to go CMC WIC! Other awardees are listed at www.californiabreastfeedingcoalition.org.

Connect with CWA

Visit CWA on Facebook! (Search for California WIC Association.)
Follow us on Twitter, too!
You’ll find us at www.twitter.com/calwic

Andrea Weiss, RD (with plaque) and Olivia Millan, IBCLC (with flowers) accepted the Mother-Baby Friendly Workplace Award on behalf of CMC WIC at the State Capitol.
Breastfeeding Updates

National Loving Support Awards

Not just one, but two California WIC programs received national recognition in July, when USDA awarded the Loving Support Awards for outstanding breastfeeding support efforts.

Sonoma County WIC received the Loving Support Gold Premiere Award of Excellence for their hard work to promote breastfeeding. From clinic décor – including posters encouraging mothers to nurse their babies any place and time – to client classes prenatally (breastfeeding plans & what to expect) and after birth (baby feeding cues), WIC moms choosing to breastfeed receive stellar support. Key to their success is a well-trained staff; everyone from office assistants to IBCLCs has extensive knowledge about breastfeeding and how to support families.

Three Peer Counselors regularly check in with expecting and new moms and make themselves available day, night and weekends to answer questions and dispel myths about breastfeeding. They’ve seen tremendous results: the breastfeeding rate among Sonoma County WIC infants was only 25% in 2007, and it’s currently 40%. Well done, Sonoma County WIC!

Northeast Valley Health Corporation WIC received the Loving Support Award of Excellence for their Breastfeed M.E. (Made Easier) Program, where five dedicated Peer Counselors support and empower 100 moms with an exceptional personalized WIC experience to achieve their breastfeeding goals. These moms receive early and prenatal breastfeeding education and ongoing support, especially during the early postpartum period. Peer Counselors build lasting relationships to fully support women during their breastfeeding journey and strive to normalize breastfeeding in their communities.

Other program components include: regular visits, calls, text messages and a welcoming hospital visit upon the birth of their baby; postpartum breastfeeding assessments and referrals to an IBCLC (as needed); a breastfeeding warmline; Saturday and Wednesday evening appointments; and a free walk-in, bilingual, weekly support group. The end result? Mothers feel safe, supported, and empowered. Congratulations, NEVHC WIC!
Celebrating World Breastfeeding Week/Month/Year!

Local WIC agencies celebrated World Breastfeeding Week with energy, creativity, partnerships, and fun! Many went beyond that week, celebrating National Breastfeeding Month, Black Breastfeeding Week, and more. In fact, we’re pretty sure all of you are celebrating – and promoting – breastfeeding all year long! We’re grateful to all of you who submitted information and photos, and hope you enjoy this collection. You’ll find event descriptions and photos plus contact info on our website at http://calwic.org/focus-areas/breastfeeding/314. Explore these great ideas to create your own event next August!

Santa Clara County WIC and partners staffed breastfeeding awareness tables in clinic lobbies.

Over 200 people joined Community Bridges WIC on their WBW Awareness Walk through Watsonville.

Local elected officials recognized the efforts of breastfeeding moms at Santa Barbara County WIC’s WBW celebration.

CinnaMoms African American Support Groups at 5 PHFE WIC sites touched the lives of 114 people.

Shasta County WIC hosted a Diaper Derby and other activities at the public library.
Breastfeeding Updates

TriCounties Breastfeeding Coalition (Colusa, Sutter, and Yuba Counties) hosted a Big Latch On at the Yuba City Farmer’s Market.

La Clinica de la Raza WIC welcomed 50 moms to their first WBW events in Oakland.

Nearly 20 partner organizations joined Stanislaus County WIC in their annual WBW Celebration, with 375 WIC participants attending!

American Red Cross WIC celebrated Black Breastfeeding Week by hosting a special support group in San Diego for African American moms and moms-to-be.

No photos, but lots of gratitude for the City & County of San Francisco WIC, which offered training to child care programs about “Accommodating Lactation at Childcare Facilities.”
Building the Continuum of Breastfeeding Care: Tulare Community Health Center

Tulare County health providers and breastfeeding specialists have been committed for several years now to building strong support for mothers and infants, from the first prenatal visit until mothers and babies wean. Tulare County WIC has a long history of providing integrated support for mothers; all staff receive 20 hours of lactation support training in the first year and 7 hours annually, and IBCLCs provide support for complex cases.

Beyond WIC, staff collaborates with local hospitals and community health clinics to provide postpartum support. Kaweah Delta Hospital provides WIC pumps for NICU baby moms on weekends when WIC is closed, and faxes referrals to WIC after deliveries. Staff at Sierra Vista Hospital and Tulare Regional Medical Center (TRMC) has been implementing multiple maternity care policies and practices that support bonding and breastfeeding with TRMC in the Baby Friendly Hospital designation process. Since January, as a result of collaboration with First 5, WIC, and TRMC, the Tulare Community Health Clinic (TCHC) has taken significant steps to ensure strong breastfeeding support as part of regular patient care. Like hospitals, community clinics can implement a number of practices that make breastfeeding part of the clinic culture.

Michelle DeLeon, a long-time employee of Tulare County WIC, is now the staff TCHC Lactation Consultant, supported by First 5 funds. She has been using multiple strategies and processes to establish a culture of support for, and acceptance of, effective breastfeeding support.

She is getting to know the medical staff and offering breastfeeding educational opportunities.

• At Tulare Regional Medical Center, Michelle meets new mothers who are TCHC patients and explains the clinic postpartum lactation services. If the baby will be a patient at TCHC, she schedules the baby’s newborn visit with a TCHC pediatrician, when the mom and baby will also follow up with Michelle for breastfeeding assistance. Michelle also facilitates a meeting for the mom with the hospital lactation consultant before discharge. Establishing that early connection encourages mothers to not only come to the newborn visit, but also their own postpartum check, often a medical visit a new mother skips.

• Michelle is gaining an understanding of billing and reimbursement, and the challenges and opportunities of Federally Qualified Health Centers (FQHC) and managed care to ensure sustainability.

• TCHC has a Comprehensive Perinatal Services Program (CPSP) and Michelle is experiencing the strength of the team aspect and valuable opportunities to use lactation and nutrition staff.

• Many clinics have multiple departments and sites, so Michelle is studying how to coordinate scheduling for moms and babies and at multiple sites.

In less than a year, Michelle and her colleagues have accomplished much, including improving outcomes. Using their Electronic Health Records (EHR) they have worked on the details of capturing data, such as training Medical Assistants to consistently ask the breastfeeding questions at well baby as well as newborn visits. The data is encouraging, with initiation rates at the newborn visit in January being 19% and in August 50%! Data for six months will be coming soon.

Congratulations to the Tulare County community for supporting a strong continuum of breastfeeding care!
CNC Scholar Spotlight

While all 2014-15 California Nutrition Corps Scholarship Awardees are listed on our website and in the last WIC Watch, we want to highlight three of the awardees. We hope their achievements inspire you to pursue your career goals!

Qiaoling (Carmen) Gong - Stefan Harvey Scholarship

Growing up in China, Mexico, and the U.S. was only the beginning of a transformational journey toward a dietetic career for Carmen. As a San Diego State University student, she seized opportunities for hands-on experiences in community nutrition and health promotion programs for low-income families. Her fluency in three languages, interpersonal skills, creativity, CLE certification, personal experience as a young mother, first-hand familiarity with the many challenges facing multi-ethnic communities, and more than five years working at American Red Cross WIC, all help equip Carmen to make great contributions to the public health nutrition profession. She’s proving this in the SDSU WIC Dietetic Internship, which she’ll complete next March.

Esmeralda Garcia - Anne Peterson Memorial Scholarship

As a Mexican-American first generation WIC baby – “I wear that title proudly,” she says – Esmeralda intimately understands the challenges that immigrant families face. Watching her parents struggle with English, translating for them, and witnessing their intelligence and support throughout these experiences strengthened her resolve and desire to help immigrant communities. She feels that the challenges inherent in a public health career make her a stronger professional. “Caring, committed, creative, and resilient” are words Esmeralda’s supervisors use to describe her. The training and education she completed last March in the PHFE WIC Dietetic Internship will complement beautifully her bilingual skills, experience working in WIC (over six years), and compassion for the families she serves.

Wendy Ceja-Garcia - Anne Garrett Memorial Scholarship

“Patient, calm, and mature” sound like great qualities for a WIC manager, don’t you think? That’s how a supervisor describes Wendy, who is working toward a career with WIC that takes her toward greater leadership and advocacy responsibilities. Her latest step on that journey was completing the PHFE WIC Dietetic Internship last March (“a dream come true”) while working on the front lines of WIC. Like many CNC Scholars, Wendy has had to juggle family obligations – including unexpected twists of fate – with work, school, and tight finances. Coming up on five years working at WIC, Wendy is just the type of dedicated professional these scholarships are designed to support!

APPLY FOR A 2016 SCHOLARSHIP!

Applications Available: November 1
DUE: January 16
Information: http://calwic.org/focus-areas/cnc-scholarships

The California Nutrition Corps scholarship fund supports employees of California local WIC programs who are advancing their professional careers within the WIC program. Applicants must be currently employed in a WIC program for at least six continuous months and enrolled in a dietetic internship, undergraduate, or graduate program.
How Do You Spell Success? WIC Worksite Wellness!

You read “success stories” in the popular press all the time. Now it’s our turn to share with you some very real and personal testimonials about the impact of CWA’s WIC Worksite Wellness (WWW) program from employees at recertified local agencies. Note: While WWW is not a weight loss program, many WIC employees find it provides them the inspiration and knowledge to work toward a healthier body weight. Learn more at http://calwic.org/focus-areas/wic-worksite-wellness.

SLAHP/LA BioMed

One of our WNAs took on the President’s Challenge the first year that we offered it to staff. She enjoyed the benefits of running so much that she continued a running routine even after the first challenge ended. She’s been taking hour-long runs or hikes, 4 to 5 times per week, for the last four years. The benefits resulting from her regular fitness routine have inspired some of her coworkers to work towards regular physical activity.

“The gym really doesn’t work for me — I like to be outdoors. So I meet with friends at the local high school and run the track where we do the bleachers as a group. We motivate each other. The President’s Challenge was really nice because it’s something you can do with your family. Over the course of the last few years I’ve lost weight and I’ve also started eating healthier, using My Plate as a guide."

— Fabiola

The Resource Connection

“It was important to me to be able to talk to our clients about their children’s health and nutrition, to talk to pregnant mothers about a healthy diet and exercise, and be able to connect with them and empathize on a personal level. I wanted to be believable, that if I could make this change, so could they. In the 3 years I’ve been a WIC employee, I’ve lost 82 pounds; my weight loss to date is 102 pounds. I feel I can validate what WIC is all about, and be relevant to the personal struggle so many of our WIC families face in weight loss, or just motivate them to make changes towards a healthy lifestyle in general."

— Samantha
Worksite Wellness

Santa Barbara County

Santa Barbara County WIC's greatest success has been the sustainability of wellness activities by all of our staff, not just one. We strive to improve our health on a daily basis. Ideas we've implemented have managed to stay alive. Spa water, healthy salad bar, walking breaks, and Zumba continue, along with the annual Walking Challenge. We share these wellness habits with our WIC participants, who say that their children are now drinking more water and less sugary drinks, as well as increasing their physical activity. Now, that’s success!

Wellness is not just for today, it’s also for tomorrow! As we continue, we are encouraged by the potential for even greater momentum, as we wait to see whether the Santa Barbara County Board of Supervisors adopts a Wellness Policy for the entire county. Until now, our wellness efforts have been primarily in the Public Health Department. If a wellness policy is adopted countywide, that will be a huge success for all Santa Barbara County employees. Stay tuned!

Community Resource Project

“I just wanted to let you know that the fitness class at our health fair inspired me to sign up for 24-Hour Fitness and I’m so happy about it. I work with a trainer and she is helping me improve my back strength and get rid of a few issues in my body. I think it was one of the best decisions in my life! Thank you for doing it for us!”

– Nadia

Get WWW Recertified!

Is your agency WWW Certified? Has your agency been a certified Well WIC Worksite for at least three years? If you answered YES to both of these questions, it’s time for your agency to get recertified! Once you complete and document four easy steps, your agency will receive a ReCertification Award valid for another three years.

For more information visit http://calwic.org/focus-areas/wic-worksite-wellness/certification.
Tell Your Story & Inspire Your Colleagues!

We’re now publishing the WIC Watch just twice a year. Send us your agency’s article ideas, photos, and best practices any time, and by February 19, 2016 for the Spring Conference Edition.

To update your e-mail or mailing address, request more copies, or submit article ideas or drafts, contact Margaret Aumann at:

maumann@calwic.org
CWA, 1450 Drew Ave., Ste. 150 • Davis, CA 95618
530.750.2280 phone • 530.758.7780 fax

Read this and past issues of the WIC Watch online at http://calwic.org/news-a-publications/wic-watch.

Welcome Sarah!

In September we welcomed our newest staff member, Sarah Diaz. As our Policy and Media Coordinator, she’s applying her skills in many areas: educating legislators, planning events, keeping us all up to date and connected via social media, and more! Be sure to say hello online, or in person at our Fall Education Day or at next April’s Annual Conference.