Winning the Battle for Market Share

As breastfeeding initiation rates have slowly and steadily increased, particularly among low-income women, the infant formula industry has grown more aggressive in its attempt to regain market share, using direct marketing, designer additives, provider subsidies, and freebies to push supplementation and thus undermine exclusive breastfeeding.

Formula companies are in a battle for market share with a unique product: breast milk, a living food that contains hundreds of active biological substances that cannot be manufactured and are not present in infant formula.

It’s up to breastfeeding advocates to make sure that the superior product wins – do your part during World Breastfeeding Week!
The California Breastfeeding Coalition (CBC) recognized the MCAH Branch of the CA Department of Public Health for its long support of breastfeeding. Mike Curtiss from the Epidemiology section of MCAH with CBC President, Bonnie Henson.

Kim Frinzell, Chief of Training, State WIC Division, and Karen Farley, CWA with the USDA Power Panther.

Recipients of the California Nutrition Corps scholarship were recognized at a reception.

WIC Division chief, Linnea Sallack, USDA Debbie Whitford, Michele Van Eyken and Bonnie Sorensen with WIC Lifetime Achievement Award recipients Joann Godoy and Beverly Clark.

The Plumas Rural Services WIC team demonstrated the many ways WIC connects the dots to achieve healthier outcomes for families.
Shape of Things to Come
and Convention Center • San Diego

The Sutter County WIC team proudly displays its dotted attire.

WIC Works Wonders and Dots the Truth.

Community Bridges WIC received the Best Practice Award for Excellence in Health Linkages, Program Promotion and Outreach.

Eric Steiner, Deputy Administrator of the USDA Food and Nutrition Service’s Special Nutrition Programs won the “Connect the Dots” contest hands down, and garnered a league of fans for his enthusiastic support for WIC.

WIC families will be able to buy fresh produce with their checks starting October 2009. The Mother’s Nutritional Center booth at the Tradeshow provides a glimpse of the future.
CWA Updates

Fall Management Conference 2008:
October 5-7, Hilton Hotel, Palm Springs

Sesame Street Comes To WIC This Fall! With a simple evidence-based and colorful format, the Sesame Workshop’s Healthy Habits for Life (HH4L) campaign will be a fantastic opportunity to simplify and align our nutrition messaging statewide and co-brand WIC with an internationally famous bunch of characters! Our Fall Management Conference, will feature fun and interactive training for your nutrition and management staff, so that you can roll out the HHFL Campaign with your frontline staff before we use the materials to promote the new WIC foods to participants later next year. There will also be a preconference session on WIC Worksite Wellness and a separate training track for our newly-minted Local Vendor Liaisons. Mark your calendars and watch for our registration materials – this is a must-attend conference!

October 15 is a Big Day for Many Statewide Breastfeeding Events!

■ Mother-Baby Friendly Workplace Awards: Nominations are being accepted for local and statewide awards honoring employers who support mothers breastfeeding in the workplace. This statewide event is a partnership of CWA, State WIC, CBC, MCH and CA Task Force on Youth and Workplace Wellness. Your local breastfeeding coalition is facilitating the awards for your community. Nominations for the three statewide awards for small, medium and large employers are due by September 1. Questions? Contact Emily Lindsey, from the California Breastfeeding CBC Coalition at emily4768@aol.com.

■ Second Annual Statewide Breastfeeding Walk: Breastfeeding: First Step to a Healthy Life. Walks are being planned across the state in local communities and at the state capitol. The purpose of the Breastfeeding Walk is to highlight the need for breastfeeding mothers to have support in the home, in the community and in the workplace for breastfeeding success. A toolkit and planning materials are available on the CWA and CBC websites: www.calwic.org and http://www.californiabreastfeeding.org/.

■ Release of policy brief on Breastfeeding and the low wage worksite: CWA will release a Policy brief on Breastfeeding and Low-Wage Worksites for use in advocating for improved lactation support. Release date planned for October 15!

Breastfeeding Ambassador Program

NEW!

Just what we need to advance our work in breastfeeding...Ambassadors. Join this cadre of professionals in WIC and our coalitions who will help advocate for breastfeeding issues. This is modeled on the WIC Ambassador program with an emphasis on breastfeeding. For more details and to join, please contact Robbie Gonzalez-Dow at R Gonzalez@calwic.org.
CWA Updates

WIC Policy Day a Hit
More than 40 CWA members came to Sacramento for WIC Policy Day on June 20 and educated their elected representatives on bills and budget items that impact the millions of families WIC serves! Briefings were provided by Herb Schultz from the Governor’s Office, Stefan Harvey from CC-PHA, and Kim Wade from Together4California, and then we hit the Capitol to make a difference! WIC Ambassadors explained to legislative staff why AB 2474 (Galgiani), the CWA-sponsored bill that would improve coordination of state obesity prevention efforts, is important to local WIC programs.

California Nutrition Corps Scholarships 2008
The CNC Program has become very popular among WIC staff wishing to advance their education. This year’s scholarship application will be available on the CWA website on September 1. Deadline for applications is November 15. The list of awardees will be announced in early December. Applicants must be employees of a WIC Agency. Past recipients are eligible to reapply.

Hospital Breastfeeding Rates Report – September 3
The third hospital breastfeeding rates report will be released on September 3, based on the data collected by the California Department of Public Health. This year’s report focuses on improving the use of the hospital model policies for breastfeeding and reducing the health disparities and cultural biases for lactation for the low income moms. The focus will be on systems that provide good breastfeeding support with resulting good breastfeeding rates.

CWA Legislative Chair par excellence, Shelly Lewis, receives an award for her extraordinary advocacy work, especially on behalf of restaurant menu labeling, from Laurie True, Executive Director, CWA.

Passionate WIC Advocates (from left), Peggy Redfern, Tulare County WIC, Ilse Arrimbide, Central Valley Indian Health, Gloria Pecina, CWA President and Director, United Health Centers of San Joaquin Valley, Carol Williams and Cortney Engleman from Kings County WIC, pounded the Capitol corridors to discuss WIC, bill and budget issues with elected representatives.
In conjunction with the Olympics this August, WBW 2008 calls for greater support for mothers in achieving the gold standard of infant feeding: breastfeeding exclusively for six months, and providing appropriate complementary foods with continued breastfeeding for up to two years or beyond.

As every country sends its best athletes to compete at these global games, it is important to remind ourselves that, in a similar fashion, a healthy young athlete can only emerge from a healthy start on life. There is no question that optimal infant and young child feeding is essential for optimal growth and development.

Be A Part of the Movement!

The breastfeeding movement is gaining momentum in California. Across the state, determined advocates are making headway in convincing California maternity hospitals to improve their infant feeding policies. Others are using new federal training resources to improve work environments for lactating mothers. Public attention to the issue has grown, thanks to hundreds of local events during World Breastfeeding Week.

WIC peer counselors are getting results, thanks to targeted federal funding. The implementation of the new WIC food packages, which make critical changes in the provision of infant formula in the first months of life, and further incentivize exclusive breastfeeding, holds great promise in further shifting community norms.

WIC is part of a worldwide wave – keep up the good work!

Supporting Mother = Supporting Her to Provide the Golden Start for Every Child!

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**BREASTFEEDING RESOURCES**

- **California WIC Association** - [http://www.calwic.org](http://www.calwic.org)
- **California Breastfeeding Coalition** - [http://www.californiabreastfeeding.org/](http://www.californiabreastfeeding.org/)
FEDERAL NEWS

Caseload growth and rising food costs have put WIC funding needs for fiscal year 2009 to just over $7.1 billion needed to serve 9.14 million WIC moms and children.

The House Appropriations Committee’s action on the markup of the Labor, Health and Human Services and Education Department Appropriations and the Agriculture Department’s appropriations ground to a standstill before the July recess. It seems very likely that there will be no House action on specific appropriations bills before the end of this calendar year. The House Agriculture subcommittee has marked up the bill to provide $6.1 billion to WIC, $550 million above that proposed in the President’s budget. This would have brought the proposed funding level for WIC to $6.65 billion.

The Senate Appropriations Committee, which marked up the Agriculture Bill on July 17, provided WIC with $6.750 billion – an increase of $1.13 billion above the fiscal year 2008 funding level and $650 million above the President’s request. The Committee projects that this funding level will serve 9 million participants. The Senate Committee restored $50 million to the Contingency Fund, a $100 million less than the $150 million request, provided no money for MIS, and $15 million for the Breastfeeding peer counselor program. The committee rejected caps on Nutrition Services funding (NSA) and Medicaid Adjunctive eligibility at 250% of poverty. The committee has stated that WIC caseload would be monitored to provide adequate funding for the program.

Both House and Senate’s Majority Leaders have confirmed Democratic plans to hold completion of the appropriations process until next year when a new president is in office. The Senate will very likely pass a continuing resolution (CR) to fund the government until early next year prior to adjourning for the fall election.

STATE UPDATES

Budget Heat: The constitutional deadline has passed with no likelihood of a budget being in place. The Senate and Assembly are conferencing on proposals with fewer cuts and more revenue for vital services than the Governor’s original, draconian, ideas. But raising taxes to get us out of the worst crisis in years will hit steep opposition in both houses, much less the Guv. Vacations have been cancelled as Legislative leaders sweat out a deal on this year’s mammoth budget deficit. Insiders are saying it will likely involve up to $10 Billion in cuts and $5 Billion in tax or lottery bailouts. Senator Perata has called for the Senate to convene on July 29 to consider the Budget bill, even though there appears to be no deal in sight. WIC Ambassadors have been communicating this message to their elected officials: “Please do not balance this year’s budget on the backs of California’s most vulnerable individuals. Seek a more thoughtful and balanced solution – including increased taxes – for California’s systemic budget problem.” ACTION:

Join Together 4 California’s Future for grassroots advocacy action on the budget. Contact Dennis Raj at 408-455-3113.

AB 2474/Galgiani. Childhood Obesity Prevention – Coordination of Campaign & Programs (Sponsor)

Status: S. Approps (August 4th)

This bill would declare the intent of the Legislature to encourage the Coordinating Office for Obesity Preven-

continued on page 18
Advocacy Efforts Result in Improved Medi-Cal

It has been over a decade since breastfeeding advocates in local coalitions first identified problems in Medi-Cal for supporting breastfeeding. As the layers of needed change were peeled away, this has proven to be a complex, but worthy undertaking. Progress has been made, and more work needs to be done to complete the process.

It Takes a Village...

Initially Medi-Cal staff and breastfeeding advocates worked in local coalition meetings to try to improve access. The Breastfeeding Promotion Advisory Committee of the former Department of Health Services provided expert input for improving Medi-Cal’s regulations with respect to breastfeeding support. In 2005 Maternal Child Health Access in Los Angeles spent months of concentrated effort gathering information and identifying problems. Since 2007 CWA, other breastfeeding advocates, and staff from the WIC and MCH Divisions of the Department of Public Health have been meeting with the Department of Health Care Services (DHCS) to streamline Medi-Cal regulations regarding lactation support for both consultations and breast pumps.

CA DHCS Supports Breastfeeding!

These efforts to improve Medi-Cal regulations for breastfeeding support the intent of the Department of Health Care Services. A recent bulletin states, “The DHCS promotes breastfeeding as the superior way to feed infants. It is a priority of the Department to promote, protect and support breastfeeding among all Californians as the most healthy and preferred method of infant feeding for at least the first year of life.”

Key to the progress has been the commitment of Medi-Cal staff to understand breastfeeding and how critical the quality and timing of support is to successful and sustained feeding, particularly exclusive breastfeeding. CWA and other breastfeeding advocates now have a better understanding of Medi-Cal operations and regulations and the impact and complexity of requesting changes.

While much remains to be done to improve access to breastfeeding consultations and pumps through Medi-Cal, several major policy issues have already been addressed, as summarized below. We’re hopeful that these improvements will begin to make a difference in Medi-Cal access once they hit the field!

The following policies apply whether the individual’s Medi-Cal coverage is through fee-for-service or managed care plans.

Who Is Covered?

- Lactation support services and breast pumps may now be billed under either the mother’s or the infant’s Medi-Cal number.

In the past, only pumps could be billed under the infant’s number. The new policy is very important as many women lose Medi-Cal eligibility at 60 days post-partum but may still need lactation support after that time. Under the new policy, even after the mother’s Medi-Cal ends, both lactation support and breast pumps can still be accessed using the infant’s Medi-Cal number.

- Coverage for both lactation consultation and breast pumps under the infant’s card is available even if the infant is older than one year of age.
This removes a major barrier to access to breastfeeding support services for toddlers for families where either the mother or the toddler has Medi-Cal coverage.

What Is the Scope of Benefits?
As noted above, both lactation consultations and breast pumps are covered by Medi-Cal.

How Are Benefits Accessed?
This depends on when the services are needed and whether the mother’s or the child’s Medi-Cal number is being used.

Lactation support: Families may access lactation support under any of the following that apply:

• the mother’s Medi-Cal number during the 60-day post-partum period through Medi-Cal’s Comprehensive Perinatal Services Program (CPSP).

• the mother’s Medi-Cal number after the post-partum period if she has “full-scope” Medi-Cal. Here, the services are part of Medi-Cal’s nutrition counseling benefits and are billed as CPT 4 codes 99211-99215.

• the child’s Medi-Cal number under Medi-Cal’s nutrition counseling benefit, with the same billing codes noted above. This major policy improvement will be issued in a formal Provider Bulletin later this year.

Are TARs required for lactation consultation under Medi-Cal?
Medi-Cal Treatment Authorization Requests (TARs) for lactation consultations are generally not required under either fee-for-service or managed care. There are some exceptions, however.

• One exception is when the standard units of CPSP consultation for the mother would be exceeded; in that case, a TAR is required for fee-for-service patients to access additional units of CPSP during the 60-day post-partum period.

• Another exception is when a child’s medical needs cannot be adequately addressed under the Medi-Cal billing codes listed above. Additional services necessary to “correct or ameliorate” any illness or condition the child experiences should be made available under Medi-Cal Early and Periodic Screening, Diagnostic and Treatment (EPSDT) program. A TAR would be required for EPSDT breastfeeding support that goes beyond the CPT codes listed above for Medi-Cal’s usual nutrition counseling benefit.

• Some managed care plans have an internal prior approval process which they may apply to breastfeeding support services of any kind. These are not Medi-Cal TARs strictly speaking, but if internal plan approval is denied, it can be appealed to both the plan and to Medi-Cal.

“The commitment of MediCal staff to recognize that quality and timing of support is critical to sustained and successful feeding has been key to improved policies.”

continued next page
For more information about appeals of TAR denials or internal plan denials, contact a local legal advocacy organization, many of which are listed at www.healthconsumer.org.

Breast Pumps

The following breast pumps are benefits of the Medi-Cal program, when prescribed by a licensed health care provider within their scope of practice.

<table>
<thead>
<tr>
<th>HCPCS Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Manual and Personal Pumps</td>
<td></td>
</tr>
<tr>
<td>E0602</td>
<td>Breast pump, manual, any style, purchase only, maximum reimbursement for purchase $23.62</td>
</tr>
<tr>
<td>E0603</td>
<td>Breast pump, electric (AC and/or DC), any type known as personal grade electric breastpump, maximum reimbursement for purchase only, $93.15</td>
</tr>
<tr>
<td>Hospital Grade Pumps</td>
<td></td>
</tr>
<tr>
<td>E0604</td>
<td>Breast pump, heavy duty, hospital grade, rental only, maximum reimbursement $2.72/day</td>
</tr>
</tbody>
</table>

The price point at which a rented pumped becomes owned by a patient due to a long term rental is $500 or approximately 180 days of rental.

TARs are required for the rental price of an electric hospital grade pump when the rental cost reaches $50, which is approximately 18 days. **CWA is asking for consideration of a policy change to eliminate or increase the TAR trigger to improve access for mothers on Medi-Cal.**

DHCS communicates important information for Medi-Cal providers through Provider Bulletins (PB), published monthly. A PB in January 2008, Bulletin 671 provides more details on breast pumps including renting hospital-grade electric pumps more than 18 days. This is another major policy improvement as we now have in writing, criteria for uniform application regarding pumps for the first time! Provider Bulletin available at: http://files.medi-cal.ca.gov/pubsdoco/publications/bulletins/dme/archive/pdf/dme20080101.pdf.

"CWA has proposed that MediCal purchase breast pumps in bulk for DME providers, which would lower costs and make the existing reimbursement rates more acceptable."

Durable Medical Equipment Provider Moratorium

Businesses exist throughout the state to provide medical equipment, for rental or sale, to patients for medical needs. Breast pumps are durable medical equipment (DME). In February 2008 a longstanding moratorium of new DME providers was lifted, except in the counties of Los Angeles, Riverside, San Bernardino, Orange and San Diego.

Given the current budget crisis, Medi-Cal reimbursement rates for breast pumps (or any other DME) will not be increased. However, CWA has proposed that Medi-Cal purchase breast pumps in bulk for DME providers, which would lower the costs and make the existing reimbursement rates more acceptable to DME providers, thereby improving access to the pumps for women and children with Medi-Cal coverage. Stay tuned for updates!

Reimbursement of IBCLCs

CWA and breastfeeding advocates are discussing with state staff ideas for including a major policy change that includes new ways to reimburse IBCLCs. Medical providers in Medi-Cal are reimbursed directly as 'providers' or indirectly as 'practioners' working under a licensed provider. Currently IBCLCs can be reimbursed as 'practitioners' in the CPSP program working under a licensed provider. Discussions continue on ideas for more ways to reimburse IBCLCs as part of the health care team in Medi-Cal.

Medi-Cal Managed Care and Lactation Support

One of the major areas of concern of breastfeeding advocates is the wide variation in lactation support provided by the various Medi-Cal Managed Care plans. The plans currently use a letter from 1998 outlining breast feeding support. Advocacy efforts will focus on more clearly defining lactation support and work toward more widespread standardization of policies and practices.

Communication of Improvements (Taking it to the streets!)

CWA and breastfeeding advocates will work with DHCS staff to disseminate this information to breastfeeding and health care providers, DME providers and manufacturers, and mothers. Look for more communications!

For questions contact Karen Farley at kfarley@calwic.org.
Researchers at the UC Davis Human Lactation Center are working with 8 California WIC clinics to find out if teaching caregivers about baby behavior can help them follow infant feeding guidelines. The study, funded by a USDA WIC Special Projects Grant, includes 4 “intervention” sites that have received staff training, handouts, posters, and class materials related to baby behavior and 4 “control” sites that are similar in size and location. The study began last fall and will continue through the end of this year.

The work that inspired this study began several years ago when the study director, Jane Heinig, began conducting focus groups among WIC mothers who had changed their minds about breastfeeding their babies. While some of the mothers quit breastfeeding because of illness or problems, many more of the mothers said they stopped because they thought they didn’t have enough milk. When asked how they knew they didn’t have enough milk, the majority of moms talked about their infants’ behavior rather than their babies’ weight or other clinical indicators. In fact, most of the mothers thought they didn’t have enough milk if their young babies cried or woke up at night. Since nearly all young babies cry and wake up at night, it is not surprising that so many mothers thought they didn’t have enough milk.

Since those focus groups were convened, the staff at the UC Davis Human Lactation Center have developed training and educational materials to help staff and participants to know more about why babies cry, what other ways babies communicate with caregivers, and how babies sleep. While the study is not over, the preliminary results suggest that information about baby behavior can be an important tool in helping parents feel more confident in caring for their babies. All of the study materials will be available online after the study is over early next year.

If babies cry and wake up at night, which are perfectly normal behavior patterns, mothers often think they have insufficient milk. Can how a baby behaves affect how a baby is fed?

Educating caregivers about why babies cry, how they sleep, and ways they communicate can be important in helping parents feel more confident caring for their babies.

For more information, please contact Dr. Jane Heinig at mjheinig@ucdavis.edu.
Smart Policies Help Shasta County WIC Breastfeeding Services Shine!

County WIC is doing a wonderful job providing breastfeeding promotion and support not only to WIC participants but also to WIC staff and the community at large. Shasta County WIC started their Breastfeeding Peer Counselor program in 2002 thanks to a grant from California First 5. Initially, Breastfeeding Coordinator Susan Spencer, a Lactation Consultant and Childbirth Educator, managed the program with only the help of a part-time secretary. Susan developed the Peer Counselor training curriculum and hired and trained Peer Counselors and Childbirth Educators. With her secretary’s help, Susan conducted outreach in the community, educating doctors, hospitals, community resource centers and other organizations about WIC’s program for prenatal and post-partum women. The Lactation Center now has 2 IBCLCs and 4 Lactation and Childbirth Educators, and the Breastfeeding Peer Counselor trainings are open to the public.

Different Groups Meet Different Needs

The robust Peer Counselor program now hosts a number of peer breastfeeding groups. There is even a support group for fathers, called “Dads Helping Dads.” Additional support groups for teen mothers and mothers with multiple births meet these moms’ special needs. These support groups are open to the general public as well.

Outreach Informs the Community

The WIC team also sponsors “Baby-Friendly Areas” at several County events, where nursing moms can relax, nurse or pump.

Shasta County WIC Lactation Consultation also provides breastfeeding education and updates to local physicians and their staff through the “Lunch and Learn” program. Breastfeeding educational materials are provided to physicians and pediatricians to share with their patients.

A Homey Setting

Initially, the Lactation Center was located apart from the WIC clinic, but in 2007 they both moved into a bigger location that they share with the Regional Shasta County Public Health department in downtown Redding. The Lactation Center is furnished like a living room, with comfy sofas, recliners and coffee tables. They even have a bed for mothers to relax in. With soft lighting, rocking chairs, beautiful pictures on the walls, and staff who eschew white coats, it is a haven for new moms from around the county. The breast pump loan program is very popular.

Collaborating Across the County

The WIC program works closely with the County Breastfeeding Coalition and networks with eighteen other agencies within the County to promote breastfeeding. The Lactation Center fills discharge bags with breastfeeding promotion materials and these are handed out to every mother who gives birth in the County hospitals. Shasta County hospitals do not include formula in the discharge bags.

WIC Director Mary Schrank says, “The Shasta County Public Health department really gets it – working in partnership and helping each other out is the way they operate.” This has proved to be a win-win situation for the community, WIC and public health departments. As the First 5 funding stream comes to an end, the County public health department has stepped in to fund this successful program.

For their passion and commitment to improve the lives of mothers and children in their County, Mary’s WIC team received the Best Practices Recognition award for exceptional breastfeeding promotion and support. Congratulations, Shasta County WIC!
Local Agency Profile

Planned Parenthood WIC: Building a Strong Foundation for a Healthier Future

In San Bernardino County, a great partnership has developed between the WIC program and a local resource center for new mothers known as MOMS.

WIC Center Manager Esperanza Suarez of the Planned Parenthood of Orange and San Bernardino County WIC Program connected with staff members of the MOMS Program at a community Health Fair. From that meeting, they have developed a series of classes and support groups for WIC families that have brought a wealth of resources.

The nonprofit MOMS (Maternal Outreach Management Systems) Resource Center provides pregnant and parenting women in Orange County with access to prenatal care, health screenings, developmental screenings, health education, and referral services. MOMS staff support women and their babies through monthly home visits and group classes on prenatal and postpartum care, parenting skills, childbirth preparation and breastfeeding, just to name a few.

The partnership between WIC and MOMS has led to the development of four modules to meet the special needs of WIC families. The modules include pregnancy classes taught by a MOMS staffer; childbirth classes, including LaMaze instruction; child development classes (described more below); and a special support package for Vietnamese mothers, in which MOMS staff provide home visits during the prenatal period and continuing until the baby’s first birthday. Breastfeeding education is a component of all the classes.

The child-development classes, called “Mommy and Me,” are offered in both Spanish and English. Age-appropriate activities to stimulate mental and physical development are demonstrated to mothers and babies in a fun and creative environment.

“It is an empowering experience for moms,” says Esperanza. “Many of them live in small, cramped homes with extended families, and the WIC clinic is a haven, where their children can run free and explore, and where moms can learn and connect with other families.”

The friendships continue well beyond the four-week class duration. After the moms graduate from the Mommy & Me program, MOMS staff help them start and conduct weekly playgroups in their local neighborhoods so the families can continue to support each other.

Esperanza praises her WIC staff’s dedication: “We are able to collaborate with different programs in the community, thanks to the effort of my wonderful staff. These efforts, she hopes, will result in improved birth outcomes, better infant and maternal health, and healthier infant development.

WIC Director Irene Salazar says, “Esperanza is a great resource to our participants. She has worked with CHP to provide participants with car seat safety training and distributing free car seats. She has garnered financial support from The Raise Foundation to provide diplomas and gifts to participants completing these sessions. She is constantly looking for ways to improve and enhance the range of services we provide to our families. She is a great asset to our program.”

With its active collaboration, the Planned Parenthood Program of Orange and San Bernardino County WIC Program is helping families make healthier futures a reality.
From the WIC Grapevine...

Have you heard the buzz? Elmo is coming to California!

The Healthy Habits for Life California Campaign is coming to all local WIC agencies in October 2008. California WIC, in partnership with Sesame Workshop and the National WIC Association, is developing a comprehensive campaign that includes employee wellness, staff training, participant education, and coordination of healthy lifestyle messages with retailers, healthcare and daycare providers, and other community organizations.

Healthy Habits for Life is designed to support the changes to the WIC foods. The first phase of the campaign is an employee wellness component. This phase will focus on engaging and motivating WIC staff and their families to improve their own eating habits and will help prepare staff for discussions with WIC families about the new WIC foods and how to incorporate healthy eating habits into their daily lives.

Local agencies will begin implementing the participant education portion of the campaign in February 2009 through December 2009. Educational topics and materials will be developed by the campaign team and all WIC families throughout the state will receive Sesame Workshop’s The Get Healthy Now Show kit. Local agencies will receive the required materials, tools, and training curriculum needed to conduct the Healthy Habits for Life participant education campaign. For more information on Sesame Workshop’s Healthy Habits for Life resources check out their website at www.sesame-workshop.org/healthyhabits.

The rollout of the new WIC foods is a historic time for the WIC community as we look forward to building a healthier future for our staff and the families we serve and truly creating healthy habits for life in California!
Career Corner: Ask Nancy

Nancy Nesa, MA, RD, Statewide Career Development Coordinator

California WIC is working to provide you with the latest information on educational programs and resources to help you achieve your career goals in community nutrition. If you would like more information on career development assistance or help preparing for the RD exam, please contact Nancy at: nnesa@projects.sdsu.edu.

Q. Did ADA come out with new education requirements to become a registered dietitian?

A. The ADA Future Practice and Education Task Force recommended the continuation of current education models to prepare dietitians and dietetic technicians. They also recognized that additional models are needed and are actively working to identify educational options to prepare RDs and DTRs for the future—so stay tuned. The paths to becoming a registered dietitian continue to include: Didactic Program in Dietetics (DPD), an accredited Bachelor’s or Master’s degree that qualifies graduates to apply for an approved dietetic internship (DI); or a Coordinated Program in Dietetics (CP) which is also an accredited Bachelor’s or Master’s degree but it combines the didactic instruction and supervised practice experiences. Following graduation with a Bachelor’s or Master’s, students are eligible to take the registration examination to be designated as an RD.

Q. I heard that it will take longer to complete a dietetic internship. Is that true?

A. The ADA Commission on Accreditation for Dietetic Education (CADE) increased the minimum number of supervised practice hours from 900 to 1200 hours. An interesting fact is that the 900 hours of practice was established in 1927. Today, most dietetic internships already provide an average of 1100 hours, so this probably won’t have a big impact on students.

For more information and a list of accredited dietetic education programs, go to the ADA Web site’s page on The Commission on Accreditation for Dietetics Education at www.eatright.org/cade.

Jamie Beaudry

It is with great sadness that Delta Health Care shares the news of the passing of our beloved friend and WIC colleague, Jamie Beaudry, CLEC on July 6.

Jamie was a Breastfeeding Peer Counselor and the “Breastfeeding Queen.” She championed the rights of breastfeeding mothers and made it her mission to promote breastfeeding and educate the community.

Jamie was an “outside-of-the-box thinker” and her creativity, innovation and vision will be greatly missed. She was studying to become an International Board Certified Lactation Consultant.

“Jamie was an integral part of our breastfeeding program,” says WIC Director Gwen Bounds. “As a mentor in our Breastfeeding Mentor Program, Jamie took WIC staff under her wing and shared breastfeeding knowledge with them. Many staff expressed the ease they felt approaching her and loved the gentle way she taught. Jamie was very well liked and respected.”

The Breastfeeding Boutique was another of the many accomplishments born out of Jamie’s passion for breastfeeding. She acquired new and gently used donations to create a store where prenatal and breastfeeding WIC participants could shop using “Mommy Dollars” that they receive for each breastfeeding class attended.

She leaves behind a husband, Jason, three daughters, Madelaine age 9, Aliyah age 4, and Clairisse age 2, family and friends.

Memorial contributions may be expressed to the Jamie Beaudry Memorial Trust, care of Golden One Credit Union, 941 West March Lane, Stockton, CA 95207, account number 935043.

To donate new or gently used items to the Jamie Beaudry Breastfeeding Boutique, please e-mail amartinez@deltahealthcare.org.

Online Guest Books are available at recordnet.com and deyoungchapels.com.
CWA and State WIC are thrilled to announce the birth of a new WIC idea, *Worksite Wellness: Healthy Habits at WIC.* The rollout of the new food package is a perfect opportunity to walk our talk. This program is intended to help connect the dots by helping WIC staff practice what they teach. Our staff members are our most valuable assets. To support WIC employees and their families embrace a healthier lifestyle, a comprehensive wellness program encompassing physical, mental and emotional well-being is critical. A strong Local Agency-led Advisory committee is working on the planning process. The purpose of the Advisory committee is to promote ownership of the *Healthy Habits at WIC* program at the “grass roots” level and help with strategic planning, implementation and evaluation. The Advisory committee will develop criteria and guidelines that will deem a WIC Agency a “Well WIC Worksite.”

In October of this year, State WIC is unveiling a new campaign, *The Healthy Habits for Life (HH4L)*, in partnership with Sesame Workshop and the National WIC Association. The HH4L is a comprehensive campaign that includes employee wellness, staff training, participant education, and coordination of healthy lifestyle messages with retailers, healthcare and daycare providers, and other community organizations, and is designed to support the changes to the WIC foods. The Sesame Street campaign will serve as an important tie-in to the WIC Worksite Wellness program. The first phase of the HH4L campaign is an employee wellness component. This phase will focus on engaging and motivating WIC staff and their families to improve their own eating habits and will help prepare staff for discussions with WIC families about the new WIC foods and how to incorporate healthy eating habits into their daily lives.

**Worksite Wellness: Healthy Habits at WIC**

**Vision:** To create and sustain a healthy and thriving WIC community that focuses on a culture of mutual support and physical, mental, and emotional well-being.

**Mission:** To ensure that staff wellness is in the forefront of prevention efforts by the WIC Program. To encourage employees’ personal and professional productivity, and physical, mental and emotional well-being, the Healthy Habits at WIC Worksite Wellness Program will adopt a holistic approach that actively supports employees to make healthy lifestyle choices.

**Goals:**

1. Adapt organizational policies around wellness - harness WIC’s success as a critical player in the state’s efforts in health promotion and obesity prevention.
2. Build capacity for community collaboration, so Wellness goals may be achieved through cooperation and integration between sectors.
3. Develop a strong strategic plan to guide efforts and activities to maximize chances of success, and link the Wellness program to overall Agency strategic objectives.
4. Develop and build sustainability into the Wellness program to keep employees engaged and challenged.
5. Prepare WIC staff around the new WIC foods, so they can be effective educators by modeling healthy eating and physical activity behaviors.
6. Contain health care costs, reduce absenteeism and employee turnover, improve morale and productivity.
7. Develop an evaluation strategy to measure progress.

Employee and Organizational Needs Assessments will be conducted this summer to better understand priorities that need to be addressed through the Worksite Wellness Program.

The day-long Pre-conference at this Fall Management meeting is titled, “*Healthy Habits for WIC: Launching a Worksite Wellness Initiative.*” Join us to explore what it would take to qualify your site or local agency as a *Well WIC Worksite!* Dr. Nick Yphantides and invited national worksite wellness experts will inspire and inform you to implement and incentivize healthy habits for all staff, and describe the benefits and cost savings that worksite wellness programs can bring to you. Several local WIC programs will describe how they overcame obstacles to improve staff wellness.

For more details, contact Kinkini Banerjee at kbanerjee@calwic.org.
The Business Case for Breastfeeding
Steps For Creating a Breastfeeding Friendly Worksite

Return on Investment (ROI) is the bottom line in assessing the value of Programs. Research shows that providing a lactation support program is not only highly desired by breastfeeding employees who return to work after childbirth, it can also improve a company’s ROI by saving money in health care and employee expenses.

The Business Case for Breastfeeding resource guide from the Department of Health and Human Services (HRSA) is an excellent resource for training. It demonstrates to company managers and others interested improving employee services how a lactation support program can:

- Lower medical costs and health insurance claims for breastfeeding employees and their infants (up to three times less for breastfeeding employees)
- Reduce turnover rates (82-96 percent of breastfeeding employees return to work after childbirth when a lactation support program is provided compared to the national average of 59 percent)
- Lower absenteeism rates (up to half the number of one day absences)
- Improve productivity
- Raise employee morale and loyalty to the company

The different components of this toolkit are:

▲ Employees’ Guide to Breastfeeding and Working

This employee’s booklet is part of a series of materials designed to create breastfeeding friendly worksites. It includes information on where to find breastfeeding help and support, how to begin breastfeeding at home, and how to adjust to breastfeeding at work. The booklet includes support websites, figures, and guidelines for addressing supervisors.

▲ For Business Managers

This manager’s booklet is part of a series of materials designed to create breastfeeding friendly worksites. It focuses on a company’s potential return on investment in the areas of employee retention, health insurance, absenteeism, productivity, and employee loyalty. The booklet includes profiles of companies with existing supportive lactation programs and references.

▲ Easy Steps to Supporting Breastfeeding Employees

This human resource’s booklet is part of a series of materials designed to create breastfeeding friendly worksites. It details an integrated approach to implementing a cost-effective lactation support program. The booklet gives steps to support breastfeeding employees, explains how to merge work requirements with employee needs, offers program options, and outlines the program’s return on investment for the company. It includes profiles of employers with existing supportive lactation programs.

▲ Marketing and Outreach Guide

The Outreach and Marketing Guide is designed for lactation professionals to assist in conducting effective outreach with employers in their communities. It includes research findings related to employment and breastfeeding, information on the environment many mothers face when they return to work, successful strategies that address employer barriers to provide support, steps to effectively reach employers in your community, template promotional letters, PowerPoint presentations, and more.

▲ Toolkit

The Lactation Support Toolkit provides template tools that can be personalized to fit the unique needs of a company. It contains all the resources needed (Assessment forms, timelines, guidelines, promotional items, newsletter communications, posters, etc.) to build a workplace Lactation Support Program.

The California Breastfeeding Coalition (CBC) is conducting Train-the-Trainer sessions on the Business Case for Breastfeeding. To order your HRSA Resource Guide and get details of training sessions, please go to www.calwic.org or http://www.californiabreastfeeding.org/.

CA Labor Commissioner Bradstreet is urging women who are not being provided appropriate accommodations for milk expressing to contact her office and file a complaint at the California Workers’ Information Hotline at 1-866-924-9757.
tion within the State Department of Public Health to take various actions to be responsible for ensuring that all relevant department programs, as specified, are informed and involved in the planning and implementation of any public education or mass media campaign that promotes healthy eating or increased physical activity for families with children.

CWA Position: SPONSOR-SUPPORT

Note: CA Dept of Public Health is officially “opposed” to our bill as of July 17th.

■ SB 1420/Padilla. Restaurant Labeling Bill
Sponsor: CA Center for Public Health Advocacy
Status: In S. Approps “Suspense” File
Bill would require restaurants to post nutritional information on most foods served at their facility that would include, but not be limited to total calories, saturated fat, trans fat, carbohydrates and sodium. This is a similar bill that was vetoed by the Governor last session for which we supported.
CWA Position: SUPPORT

Status: Passed Senate; To Assembly Floor
Would add bisphenol A to the types of substances that will need to be removed from certain childhood toys/bottles/cups by January of 2010.
CWA Position: SUPPORT

■ AB 2694/Ma. Eliminating Lead in Childhood Toys
Status: S. Health Committee
This bill is complementary to Migden’s SB 1713 and would ban lead from childhood toys by Jan. 1, 2012.
CWA Position: SUPPORT

■ AB 1/Laird & SB 32/Steinberg. Health Care Coverage Expansion for Children
Sponsor: 100% Campaign & PICO CA
Status: Inactive Files in Each House
Both of these bills were held on their respective floors at the end of last session due to efforts to support broader Health Care Reform & Expansion. Those larger HCR efforts have failed and thus these two bills could get revived in 2008, although funding will remain a major obstacle given the state budget shortfall. We will remain in “support”, but will apprise the board if the bills get amended in any fashion.
CWA Position: SUPPORT

■ AB 2572/Para. Restaurant Labeling Bill
Sponsor: CA Restaurant Association
Status: S. Approps (Aug 4th)
According to our contacts, this bill would simply codify the status quo and is the bill the CA Restaurant Association is sponsoring in response to SB 1420/Padilla.
CWA Position: SUPPORT

■ AB 433/Beall. Extends Sunset Date of Healthy Food Purchase Pilot Program
Sponsor: CA Food Policy Advocates
Status: S. Approps (Aug 4th)
The bill would extend for one year the January 1, 2011 sunset date of the Healthy Food Purchase pilot program to January 1, 2012. This program is intended to increase the sale and purchase of fresh fruits and vegetables in low-income communities.
CWA Position: SUPPORT

■ AB 2821/Feuer
Would ban marketing of most gifts by drug companies, including formula
Status: Died in A. Health
Companies killed this bill. It may reappear at later date. Will continue to monitor.

The bill would require the Office of Statewide Health Planning and Development (OSHPD), in collaboration with the California Workforce Investment Board, to establish a task force to assist OSHPD in developing a health care workforce master plan for the state. In addition, it would require the Legislative Analyst’s Office to prepare a report on health workforce data and data collection capacity.

CWA Position: SPONSOR-SUPPORT

Child Nutrition and WIC Reauthorization
What would you like to change about WIC policy? You have the opportunity to give your input. USDA is holding a Listening Session in San Francisco on August 6, 2008. For more details go to: http://www.fns.usda.gov/cga/Sessions/default.htm.
Educational Resources

- *Breastfeeding Answer Book*, 3rd Revised Edition by Nancy Mohrbacher and Julie Stock
- *Breastfeeding Answer Book* (pocket guide), by Nancy Mohrbacher and Julie Stock
- *Breastfeeding: A Parent’s Guide* by Amy Spangler
- *Breastfeeding & Human Lactation*, Jan Riodan
- *Breastfeeding Handbook for Physicians* by AAP, ACOG and AAFP (softcover)
- *Breastfeeding Management for the Clinician: Using the Evidence* by Marsha Walker
- *Clinical Therapy in Breastfeeding Patients*, 2nd revised edition by Thomas Hale & Pamela Berens
- *Counseling the Nursing Mother*: Fourth revised edition by Judith Lauwers and Anna Swisher
- *Core Curriculum for Lactation Consultant Practice* by Marsha Walker
- *Comprehensive Lactation Consultant Exam Review* by Linda J. Smith, BSE, FACCE, IBCLC
- *Medications and Mothers' Milk*, 2006 by Thomas Hale, Ph.D.
- *The Lactation Consultant in Private Practice: The ABCs of Getting Started* by Linda J. Smith, BSE, FACCE, IBCLC

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Recipe

Mediterranean Bean Salad

Prep Time: 20 Minutes
Ready In: 2 Hours 20 Minutes
Yields: 4 servings

This is an easy, healthy salad that is a great side dish to BBQ chicken, beef or fish! It can also be easily adapted to a Tex-Mex style by changing the lemon to lime, parsley to cilantro and adding ground cumin and/or chili powder! Be sure to add the lemon zest (or lime zest) as this really adds a ZING to the salad!

**INGREDIENTS:**

- 1 (15.5 ounce) can garbanzo beans, drained
- 1 (15 ounce) can kidney beans, drained
- 1 lemon, zested and juiced
- 1 medium tomato, chopped
- 1/4 cup chopped red onion
- 1/2 cup chopped fresh parsley
- 1 teaspoon capers, rinsed and drained
- 1 red bell pepper, finely chopped
- 1 cucumber, finely diced
- 3 tablespoons extra virgin olive oil
- 1/2 teaspoon salt, or to taste

**DIRECTIONS:**

In a large bowl, stir together the garbanzo beans, kidney beans, lemon juice and zest, tomato, onion, bell peppers, cucumber, parsley, capers, olive oil and salt. Cover, and refrigerate for about 2 hours, stirring occasionally, before serving.

*From allrecipes.com*
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2008 - 2009

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You have a story to tell!
You have a program to showcase!
Contribute to the WIC Watch.

Upcoming Newsletters are already being planned around the following themes:

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<th>ISSUE</th>
<th>THEME</th>
<th>DEADLINE</th>
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Need more newsletters?
New e-mail address?
Want to be added to the Flash e-mail?

For World Breastfeeding Week, Alameda County WIC will send a Breastfeeding package to CHDP providers and obstetricians, which will include this beautiful breastfeeding promotion poster, copies of Tom Hale’s “Breastfeeding and Medications” book, and a brochure outlining their breastfeeding services.

Pump up your own outreach efforts for WBW!

Photographs by William McLeod and Thom Cheney

SAVE THE DATE!
2008 FALL MANAGEMENT CONFERENCE
Sunday, Oct. 5-7, 2008
(Prefonference Sun., Oct. 5)
The Hilton • Palm Springs, CA

California WIC Association
1107 9th Street, Suite 625,
Sacramento, CA 95814