

TRANSITIONING TO OBESITY PREVENTION: HARNESSING WIC'S SUCCESS TO PROMOTE HEALTHY EATING AND ACTIVE LIVING

BACKGROUND

As the largest provider of nutrition and breastfeeding support services to infants and toddlers, California's Women, Infants, and Children Supplemental Nutrition (WIC) program is well positioned to provide proactive leadership on efforts to prevent obesity and encourage healthy lifestyles in communities across California. The WIC program has deep expertise with respect to nutrition education and giving families the knowledge and skills needed for making healthy choices. One needs only to look at WIC's successful efforts to promote breastfeeding, itself an important factor for the prevention of obesity, for evidence of this.

In the past decade, overweight and obesity have eclipsed nutrient deficiency and stark hunger, as the most serious public health nutrition problem facing the low-income population WIC serves. About 28% of all WIC participants (and 25% of WIC children age 1-5) are overweight (weight-for-height greater than the 95th percentile), according to state data; with the highest obesity rates among Hispanics, African Americans, and Native Americans.ⁱ In 2003, over 40% of children enrolled in California Head Start were overweight.ⁱⁱ The consequences are staggering: increased rates of type II diabetes, heart disease, respiratory difficulties, psychosocial problems, and adult obesity that cost California an estimated \$25 billion annually and will kill more people than AIDS, violence, car crashes and drugs combined.ⁱⁱⁱ

In recognition of the WIC program's unique position, the California WIC Association and California WIC Branch launched *Transitioning to Obesity Prevention: Harnessing WIC's Success to Promote Healthy Eating and Active Living*, a policy development process intended to shape California WIC's direction and priorities for obesity prevention in the coming decade. The policy development process provided an opportunity for the WIC community to identify the areas where it could make a difference with respect to improving nutrition and activity environments for WIC participants, while also considering the new or strengthened partnerships and collaborations that may be required.

Throughout the six month process, WIC leaders from throughout the state explored how to make changes in the broader environment that would support the ability of WIC participants to make healthy choices for themselves and their families. Putting healthy lifestyle promotion at the front and center of WIC's work with families and communities requires a focus not only on individual counseling and support but also on public policy and organizational practices. Prevention Institute, an Oakland-based, national center working to build momentum for effective primary prevention, facilitated the process, lending its expertise on creating comprehensive prevention strategies for improving health and well-being.

WIC BASICS

The WIC Supplemental Nutrition Program is a federally funded assistance program targeted to:

- low and moderate income pregnant women,
- non-breastfeeding mothers of infants less than six months old,

- breastfeeding mothers of infants less than one year old, and
- infants and children less than five years old.

WIC services include nutrition education, breastfeeding promotion and support, nutritious supplemental foods, and referrals to health and social services.

In California, 1.3 million participants receive services from the WIC program each month. The WIC program reaches into virtually every low-income community in California and touches the lives of 60 percent of all infants born here. Local programs serve approximately 70-80 percent of all those who are eligible. Generally speaking, over 50 percent of WIC participants are children, while another 20 percent are infants. WIC participants are racially and ethnically diverse: 75 percent are Hispanic, 12 percent are White, 6.5 percent are African American, and 6 percent are Asian. There are 650 WIC sites located in all 58 counties. With over 3,000 employees, many of whom are past or current participants, WIC's culturally diverse staff can test and model effective practices that can be replicated elsewhere.

Over 75 studies have documented WIC successes in improving maternal and child health. The most significant impact has been on reducing the number of low birth weight and pre-term babies. WIC saves \$3 in medical care expenses for each WIC dollar spent for pregnant women. WIC contributes to lowered rates of pediatric anemia and has made significant progress in increasing the number of new mothers who start out breastfeeding. WIC's plans to address obesity through a focus on encouraging physical activity and good nutrition will build upon its past success with changing community norms around the issue of breastfeeding.

THE PROCESS

The six-month policy development process began in July with a two-day meeting in Sacramento that included representatives from the California Department of Health Services (in a separate morning meeting), the state WIC Branch, and WIC local agencies from throughout California. This initial meeting served to orient the WIC community to the importance of environmental approaches for making and sustaining effective prevention efforts. While one of WIC's core strengths is one-on-one education and skill-building, the potential for the WIC community to influence and shape policies and organizational practices was also highlighted. Upon considering the need for comprehensive prevention strategies, meeting participants broke into small groups to identify and prioritize opportunities for action. At the close of the meeting, a 25-member Working Group was nominated and tasked with turning the day's initial work into a comprehensive set of recommendations.

The first meeting of the Working Group, in August, began with a review of the available research and promising practices with respect to promoting healthy eating and physical activity at the community level. Taking into account this information and the initial priority recommendations that emerged from the WIC community meeting in July, Working Group members identified four key "strategic areas" around which specific recommendations would cluster. The four strategic areas are:

- Encourage breastfeeding and appropriate infant/toddler feeding
- Make regular physical activity the norm for WIC families
- Ensure access to healthy food
- Promote healthy eating

Four subcommittees were established, one for each strategic area, and tasked with reviewing and refining their corresponding set of recommendations. Also at this meeting, the Working Group suggested an overarching theme that would serve to unite the strategic areas and recommendations into a comprehensive framework. After some reworking, the theme became: *Inspiring People to Make Healthy Choices: It's Education and More.*

The Working Group convened again in October to review the progress made on the strategic areas and recommendations. The group provided feedback and suggestions to the subcommittees, which reconvened to further strengthen and refine the recommendations. The recommendations reflect areas where the WIC community may take a leadership role or where it may need to partner with others who will take the lead. Therefore, a significant amount of time was set aside at the meeting to consider the potential partnerships and collaborations that might be required for implementation.

In early November, the working group took advantage of regularly scheduled WIC Regional Meetings to share the draft framework with their colleagues and solicit initial reactions. This discussion set the stage for the November 17th meeting, the final meeting of the process, at which time the Working Group shared the framework with the larger WIC community that included representatives from the WIC Branch and local WIC agencies. Input was solicited and incorporated by the working group. In December, Prevention Institute finalized the report and initiated interviews with potential WIC collaborators. While the policy development process has formally concluded, the WIC program is at the beginning of a comprehensive and concerted effort to turn the tide on obesity in California.

THE STRATEGIC AREAS AND PRIMARY RECOMMENDATIONS

WIC staff and leadership came together with the goal to more fully utilize WIC's capacity to reduce and prevent childhood obesity. The WIC community is committed to encouraging important policy and organizational changes as well as providing education to improve food and activity-related behaviors. Four interrelated strategic areas were identified as key to inspiring people to make healthy choices. These four strategic areas are:

- 1. Encourage breastfeeding and appropriate infant/toddler feeding**
Early childhood is a critical time for cultivating healthy eating habits that last a lifetime. Breast milk is rich in nutrients and provides immune protection. Breastfeeding is a proven practice for setting a foundation for healthy eating and obesity prevention. The goal of this strategic area is to promote healthy early feeding. These efforts include supporting exclusive breastfeeding as the norm, and encouraging appropriate complementary infant and toddler feeding.
- 2. Make regular physical activity the norm for WIC families**
Physical activity and active living is a key strategy for obesity prevention. The goal of this strategic area is to promote and support increased physical activity and active living as the norm for WIC families.
- 3. Ensure access to healthy food**

Families need to have access to healthy foods as a prerequisite for making good food choices. Cost, availability, location, and desirability may all be barriers to consuming a healthy diet. The goal of this strategic area is to ensure access to healthy foods among WIC families.

4. Promote healthy eating

Families can benefit from education and support on how eat a more healthful diet and make more informed choices when it comes to food purchase and preparation. The goal of this strategic area is to promote healthy eating as the norm for families to prevent obesity and improve health.

Primary Recommendations

What follows is a summary of the primary recommendations to improve the health of WIC families identified as important starting points. The recommendations are divided into two key areas:

- a) Organizational and Legislative Policy Changes that promote Healthy Eating and Active Environments¹
- b) Supportive Education and Training Activities to Inspire People to Make Healthy Choices²

¹ *Spectrum of Prevention* levels 5 and 6. See page 7 for a description of the *Spectrum of Prevention* levels.

² *Spectrum of Prevention* levels 1-3. See page 7 for a description of the *Spectrum of Prevention* levels.

a) Organizational and Legislative Policy Changes that promote Healthy Eating and Active Environments (*Spectrum Levels 6 and 5*)

Key organizational and legislative policy strategies were identified by the WIC community to support the four strategic areas of its “*Inspiring People to Make Healthy Choices*” initiative.

Support federal, state, and organizational and legislative policies changes that promote breastfeeding and healthy early feeding

- Provide leadership via CWA and other organizations to the breastfeeding community to develop a policy agenda
- Include issues related to breastfeeding, infant formula and the role of industry marketing in campaigns targeting marketing of unhealthy foods
- Promote the implementation of model breastfeeding policies in hospitals to encourage hospitals to support exclusive breastfeeding along with offering formula
- Develop a statewide policy of tailoring infant food packages to encourage continued breastfeeding when mothers choose not to exclusively breastfeed
- Align WIC policy and education with current AAP recommendations regarding introduction of complementary foods

Support federal, state and organizational and legislative policies that promote physical activity and active living

- Support statewide legislation that will address liability concerns for staff and participants to decrease barriers to conducting WIC sponsored physical activity programs
- Develop and implement a physical activity component of a WIC employee wellness program to enhance WIC employee fitness and increase their effectiveness as role models

Support federal, state and organizational and legislative policies that ensure access to healthy foods

- Advocate for a streamlined application process in all Federal Nutrition Programs
- Advocate for a California Fruit and Vegetable pilot program for the WIC food package
- Advocate for changes to the WIC food package to include healthier options
- Advocate for WIC to expand the definition of authorized vendors to include certified farmers markets
- Support the development of community gardens
- Build on existing partnerships with WIC vendors at state and local levels to foster excellent customer service for WIC participants
- Work with WIC vendors to expand healthy food choices and improve product placement
- Work with grocers to ensure store availability in low-income neighborhoods

Support federal, state and organizational and legislative policies that promote healthy eating among WIC families

- Support federal and/or state legislation that institutes or expands nutrition education for low-income children, youth, and families
- Provide recommendations to USDA to evaluate and revise the Thrifty Meal Plan
- Establish worksite wellness policies and practices that promote healthy options for staff and WIC participants
- Establish and formalize WIC parent advisory organizations (i.e., the Head Start model)

b) Supportive Education and Training Activities to Inspire People to Make Healthy Choices (*Spectrum Levels 1-3*)

Key education and training efforts were identified by the WIC community to support the four strategic areas of its “*Inspiring People to Make Healthy Choices*” initiative.

Provide WIC Families With The Knowledge And Skills To Make Healthy Choices

WIC program staff will encourage healthy habits and provide WIC families with the information and skills to make healthy choices, at WIC sites and through the media, and through other key community institutions.

- Utilize learner-centered techniques in providing breastfeeding, infant and toddler feeding and parenting education
- Inform WIC participants about existing laws and resolutions in support of breastfeeding
- Ensure the promotion of physical activity in both WIC group and WIC individual educational encounters
- Assess barriers to physical activity such as neighborhood built environments and screen-time habits (including television viewing, computer use and video-game playing), and support participants in developing strategies to address these barriers
- Educate WIC participants on available community food programs and local store options to purchase healthy foods, and assist them to access these resources
- Equip WIC families with the skills to select, purchase, prepare, and provide healthy meals on a budget (in the home and outside the home), and advocate for healthy lifestyle options

Educate WIC Staff

Strengthening training for WIC staff is essential to enhance WIC staff’s pivotal role in providing WIC Families with information, motivation, and skill building opportunities. It is necessary for frontline staff to be well-informed about nutrition and physical activity issues as well as effective interviewing, counseling and education techniques. Furthermore, it is necessary for WIC staff to be encouraged to adopt and model healthy practices and habits in their own families.

- Develop and share unified nutrition and physical activity messages within WIC
- Equip WIC staff with the skills to advocate for policies and organizational changes inclusive of all strategic areas
- Strengthen training to frontline staff to effectively include breastfeeding, infant feeding, physical activity promotion, weight concerns, and nutrition in their participant encounters
- Utilize motivational interviewing, counseling and education techniques to give participants the space to voice what they really feel and need and to support their behavior change
- Use the “promotora” (peer counseling) model for nutrition and physical activity promotion.

Educate Community Health Providers

WIC families will benefit from consistent information and hearing behavioral messages reinforced. There are a number of service providers that consistently interact with WIC participants and provide nutrition or physical activity-related information. These include health care, Head Start and other preschool programs. WIC should ensure these providers have access to accurate information and effective techniques for working with families to improve eating and activity habits.

- Share current American Academy of Pediatrics (AAP), American College of Obstetricians and Gynecologists (ACOG), and other guidelines for early feeding with health care providers

- Inform the community health providers of WIC's new capacity to serve as a resource for physical activity education and support
- Share appropriate educational materials, screening and motivational tools
- Develop and share unified nutrition and physical activity messages among WIC and partners
- Collaborate with community health providers on staff training

THE FRAMEWORK: *INSPIRING PEOPLE TO MAKE HEALTHY CHOICES: IT'S EDUCATION AND MORE*

The full set of recommendations under each strategic area are presented below. They are organized using the *Spectrum of Prevention* framework, a tool to ensure comprehensive approaches to prevention. The six levels on the Spectrum are complementary and when used together produce a synergy that results in greater effectiveness than would be possible by implementing any single activity. The six levels of the *Spectrum* are:

- *Influencing Policy and Legislation (Level 6)*: Developing strategies to strengthen laws and policies that promote healthy eating and active living.
- *Changing Organizational Practices (Level 5)*: Adopting regulations and shaping norms to promote healthy eating and active living.
- *Fostering Coalitions and Networks (Level 4)*: Bringing together groups and individuals for broader goals and greater impact on promoting healthy eating and active living.
- *Educating Providers (Level 3)*: Informing providers who will transmit skills and knowledge to others to promote healthy eating and active living.
- *Promoting Community Education (Level 2)*: Reaching groups of people with information and resources to promote healthy eating and active living.
- *Strengthening Individual Knowledge and Skills (Level 1)*: Enhancing an individual's capability for healthy eating and active living.

STRATEGIC AREA 1: ENCOURAGE BREASTFEEDING AND APPROPRIATE INFANT/TODDLER FEEDING

Work Group Members: Cathy Cavanaugh, Carol Chase, Magdalene Louie, Kiran Saluja, Mary Sammer, Laurie True

Early childhood is a critical time for cultivating healthy eating habits that last a lifetime. Breast milk is rich in nutrients and provides immune protection. Breastfeeding is a proven practice for setting a foundation for healthy eating and obesity prevention. The goal of this strategic area is to promote healthy early feeding. These efforts include supporting exclusive breastfeeding as the norm, and encouraging appropriate complementary infant and toddler feeding.

Spectrum of Prevention Level	Recommendations
6. Influencing Policy and Legislation:	<ul style="list-style-type: none"> • Provide leadership via CWA and other organizations to the breastfeeding community and develop a policy agenda • Include issues related to breastfeeding, infant formula and the role of industry marketing in campaigns targeting marketing of unhealthy foods
5. Changing Organizational Practices	<ul style="list-style-type: none"> • Promote the implementation of model breastfeeding policies in hospitals to encourage hospitals to support exclusive breastfeeding along with offering formula • Develop a statewide policy of tailoring infant food packages to encourage continued breastfeeding when mothers choose not to exclusively breastfeed • Align WIC policy and education with current AAP recommendations regarding introduction of complementary foods
4. Fostering Coalitions and Networks	<ul style="list-style-type: none"> • Engage key strategic partners including: <ul style="list-style-type: none"> ◦ State Department of Health Services Breastfeeding Promotion Advisory Committee and Maternal and Child Health ◦ Jane Heinig, UC Davis, Breastfeeding Coalitions ◦ Proposition 10 community ◦ California Conference of Local Health Officers (CCLHO)
3. Educating Providers	<ul style="list-style-type: none"> • Strengthen all early feeding trainings provided to WIC front line staff • Share current American Academy of Pediatrics (AAP), American College of Obstetricians and Gynecologists (ACOG), and other guidelines for early feeding with health care providers • Equip WIC staff and medical providers with early feeding messages and screening tools
2. Promoting Community Education	<ul style="list-style-type: none"> • Expand the use of peer counselors/promotoras to assist families with early feeding options • Conduct public education campaigns with appropriate early feeding messages • Expand website resources on early feeding for staff and participants
1. Strengthening Individual Knowledge and Skills	<ul style="list-style-type: none"> • Review and update the WIC Nutrition Assistance (WNA) manual and other training support from the State to reflect the current science with respect to early feeding • Utilize learner-centered techniques in providing breastfeeding, infant and toddler feeding and parenting education • Inform participants about existing laws and resolutions in support of breastfeeding • Review and update early feeding education resources to reflect current AAP, ACOG and other applicable guidelines

STRATEGIC AREA 2: MAKE REGULAR ACTIVITY THE NORM FOR WIC FAMILIES

Work Group Members: Karen Bertram, Betsy Cline, Elaine Emery, Leslie Shanders, Cheri Sperl

Physical activity and active living is a key strategy for obesity prevention. The goal of this strategic area is to promote and support increased physical activity and active living as the norm for WIC families. The WIC community will build on demonstrated success of previous initiatives such as FitWIC and WIC Walks the Talk. This assumes a strategy that focuses first on WIC staff and uses WIC staff as role models for WIC participants and the community.

Spectrum of Prevention Level	Recommendations
6. Influencing Policy and Legislation:	<ul style="list-style-type: none"> • Support statewide legislation that will address liability concerns for staff and participants to decrease barriers to conducting WIC sponsored physical activity programs
5. Changing Organizational Practices	<ul style="list-style-type: none"> • Develop and implement a physical activity component of a WIC employee wellness program to enhance WIC employee fitness and increase their effectiveness as role models
4. Fostering Coalitions and Networks	<ul style="list-style-type: none"> • Work with partners to ensure a continuum of physical activity opportunities: <ul style="list-style-type: none"> ○ State Department of Health Services California Center for Physical Activity, California Nutrition Network, California Department of Health Services ○ State Department of Education ○ Sponsoring agencies of WIC sites ○ WIC Parent Advisory Groups ○ Parks and Recreation Departments ○ Medical community ○ Faith-based institutions
3. Educating Providers	<ul style="list-style-type: none"> • Assist WIC staff, the medical community, and other providers to competently include physical activity promotion in their participant encounters
2. Promoting Community Education	<ul style="list-style-type: none"> • Inform the community of WIC’s new capacity to serve as a resource for physical activity education and support for WIC families • Ensure that WIC participants are informed of physical activity-related community events and resources
1. Strengthening Individual Knowledge and Skills	<ul style="list-style-type: none"> • Ensure the promotion of physical activity in both WIC group and WIC individual educational encounters • Assess barriers to physical activity such as neighborhood built environments and screen-time habits (including television viewing, computer use and video-game playing), and support participants in developing strategies to address these barriers.

STRATEGIC AREA 3: ENSURE ACCESS TO HEALTHY FOODS

Work Group Members: Evelyn Caceres-Chu, Gayle Hoxter, Gloria Pecina, Linnea Sallack, Edie Wiltsee, Diane Woloshin

Families need to have access to healthy foods as a prerequisite for making good food choices. Cost, availability, location, and desirability may all be barriers to consuming a healthy diet. The goal of this strategic area is to ensure access to healthy foods among WIC families.

Spectrum of Prevention Level	Recommendations
6. Influencing Policy and Legislation:	<ul style="list-style-type: none"> • Advocate for a streamlined application process in all Federal Nutrition Programs • Advocate for a California Fruit and Vegetable pilot program for the WIC food package • Advocate for changes to the WIC food package to include healthier options • Advocate for WIC to expand the definition of authorized vendors to include certified farmers markets • Support the development of community gardens
5. Changing Organizational Practices	<ul style="list-style-type: none"> • Build on existing partnerships with WIC vendors at state and local levels to foster excellent customer service for WIC participants • Work with WIC vendors to expand healthy food choices and improve product placement • Work with grocers to ensure store availability in low-income neighborhoods
4. Fostering Coalitions and Networks	<ul style="list-style-type: none"> • Engage key strategic partners including: <ul style="list-style-type: none"> ○ Grocers ○ Federal Nutrition Programs and local emergency food programs ○ Hunger coalitions and other advocacy collaborations ○ Community gardens associations
3. Educating Providers	<ul style="list-style-type: none"> • Educate WIC vendors on WIC Nutrition Education Initiatives
2. Promoting Community Education	<ul style="list-style-type: none"> • Expand WIC and other Federal Nutrition Program outreach and referral
1. Strengthening Individual Knowledge and Skills	<ul style="list-style-type: none"> • Educate WIC participants on available community programs and assist them to access these resources. Examples of programs include: food stamps, school meals, Child and Adult Care Food Program (CACFP), Community Food and Nutrition Program (CFNP) and local emergency food programs • Educate WIC families on local store options to purchase healthy foods

STRATEGIC AREA 4: PROMOTE HEALTHY EATING AMONG WIC FAMILIES

Work Group Members: Nancy Damiani, Kim Frinzell, Delinda Horton, Eloise Jenks, Anne Patterson, Esther Vasquez, Lisa Webster

This strategic area addresses issues related to supporting families in eating a more healthful diet and making more informed choices when it comes to food purchase and preparation. The goal of this strategic area is to promote healthy eating as the norm for families to prevent obesity and improve health through implementation of these recommendations. WIC will support families in making healthy and informed choices about food through education, training, and modeling healthy habits.

Spectrum of Prevention Level	Recommendations
6. Influencing Policy and Legislation:	<ul style="list-style-type: none"> • Support federal and/or state legislation that institutes or expands nutrition education for low-income children, youth, and families • Provide recommendations to USDA to evaluate and revise the Thrifty Meal Plan
5. Changing Organizational Practices	<ul style="list-style-type: none"> • Establish worksite wellness policies and practices that promote healthy options for staff and WIC participants • Establish and formalize WIC parent advisory organizations (i.e., the Head Start model)
4. Fostering Coalitions and Networks	<ul style="list-style-type: none"> • Engage key strategic partners including: <ul style="list-style-type: none"> ○ State Department of Education ○ Sponsoring agencies of WIC sites(e.g., County Health Departments or private non-profit organizations) ○ School Board Associations ○ Parent Teacher Associations ○ Grocers Associations ○ Cooperative Extension ○ National Restaurant Association ○ State Department of Agriculture
3. Educating Providers	<ul style="list-style-type: none"> • Prepare WIC staff to be able to discuss issues of diet, nutrition, weight, and health with WIC participants • Develop and share a unified message within WIC and with partners • Collaborate with other health and nutrition programs to train staff on nutrition counseling protocols
2. Promoting Community Education	<ul style="list-style-type: none"> • Disseminate appropriate nutrition education messages, materials, and techniques to community-based organizations that also serve WIC families
1. Strengthening Individual Knowledge and Skills	<ul style="list-style-type: none"> • Build the skills of WIC families to select, purchase, prepare, provide healthy meals on a budget (in the home and outside the home) • Equip WIC participants with the skills to advocate for healthy lifestyle options

POTENTIAL KEY PARTNERS (SAMPLE CHART)

The following chart captures initial work to identify potential key partners for implementing many of the recommendations and these partners’ potential role. The column describing next steps has been left blank, except for one example, and may aid future work to determine the next steps for implementation.

Key Strategic Partners	Roles	Next Steps <i>(to be completed)</i>
Food vendors and associations	<ul style="list-style-type: none"> • Provide good, friendly service to WIC participants • Improve product placement, i.e., candy-free checkout stands • Expand the availability of healthy food options 	<i>Example:</i> Expand training opportunities for vendors
Federal Nutrition Programs and local food programs	<ul style="list-style-type: none"> • Share current outreach and enrollment materials • Work with WIC to streamline the application form and process 	
State Health Departments: <i>Nutrition Network, CHDP, MCH, Licensing and Certification, Breastfeeding Advisory Committee</i>	<ul style="list-style-type: none"> • Develop and disseminate unified messages • Share expertise, resources, and opportunities to partner where appropriate • Work with WIC on developing and advancing a breastfeeding policy agenda • Provide leadership to support policies that address liability concerns 	
WIC Parent Organizations	<ul style="list-style-type: none"> • Support model worksite wellness policies and practices • Reinforce existing laws and resolutions in support of breastfeeding 	
CA Department of Education	<ul style="list-style-type: none"> • Share information and resources promoting physical activity in communities • Promote efforts to institute or expand nutrition education and home economics in schools 	
Proposition 10 community	<ul style="list-style-type: none"> • Support educational efforts that emphasize establishing healthy early feeding practices • Build on each other’s work at local and state levels 	
Jane Heinig, U.C. Davis, and CA Breastfeeding Coalition	<ul style="list-style-type: none"> • Partner on efforts to develop and promote a breastfeeding policy agenda 	
Childcare community (e.g., Head Start)	<ul style="list-style-type: none"> • Adopt healthy early feeding practices and policies 	

PARTICIPANTS

Working Group Members:

Karen Bertram, California WIC Branch
Evelyn Caceres-Chu, Santa Clara County
Cathy Cavanaugh, Community Bridges
Carol Chase, California WIC Branch
Betsy Cline, San Bernadino County
Nancy Damiani, Harbor – UCLA R.E.I.
Elaine Emery, Stanislaus County Health Department
Kim Frinzell, California WIC Branch
Delinda Horton, West Oakland Health Council
Gayle Hoxter, Riverside County Department of Public Health
Eloise Jenks, PHFE Management Solutions
Carol Kronberg, Sonoma County Department of Health Services
Magdalene Louie, San Francisco City and County
Anne Patterson, Santa Barbara County
Gloria Pecina, United Health Centers of San Joaquin
Linnea Sallack, California WIC Branch
Kiran Saluja, PHFE Management Solutions
Mary Sammer, North County Health Services
Leslie Shanders, Glenn County Health Services
Cheri Sperl, Clinica Sierra Vista
Laurie True, California WIC Association
Esther Vasquez, United Health Centers of San Joaquin
Lisa Webster, Yolo County
Eddie Wiltsee, Monterey County
Diane Woloshin, California WIC Association

Steering Committee:

Carol Chase, California WIC Branch
Elaine Emery, Stanislaus County Health Department
Marianne Lewis, California WIC Branch
Linnea Sallack, California WIC Branch
Laurie True, California WIC Agency
Michele van Eyken, California WIC Branch
Diane Woloshin, California WIC Agency

WIC Community Advisory Group:

Lisa Andrews, PHFE Management Solutions
Andrea Aquino, Planned Parenthood, Orange County
Andy Barbusca, California WIC Branch
Marcia Barnes, Sutter County
Debbie Begley, Solano County Health and Social Services
Michelle Bieber,
Patty Blomberg, California WIC Branch
Teri Broadhurst, Solano County Health and Social Services
Bonnie Broderick, Santa Clara County Department of Public Health
Martha Bureau, Alameda County Health Care Services Agency
Beverly Clark, Contra Costa County
Maureen Clarke, CRP-WIC Sacramento
Kathy DeMaggio, Solano County Health and Social Services

Nancy Dodge, California WIC Branch
Teri Duarte, Sacramento County
Paula Etcheberry, California WIC Branch
Sandy Fagin, California WIC Branch
Lynn Frasier, PHFE Management Solutions
Joann Godoy, Monterey County Health Department
Judy Gomez, PHFE Management Solutions
Pat Gradziel, California WIC Branch
Janet Hill, California WIC Branch
Cora Howe, California WIC Branch
Jennifer Jeffries, PHFE Management Solutions
Anne Kennedy, PHFE Management Solutions
Denise Kirnig, Solano County Health and Social Services
Mary Langlois, North County Health Services
Sarah Larson, San Diego State University Foundation
Maria Le Claire, San Francisco City and County
Kitty Lenhart, Solano County Health and Social Services
Marianne Lewis, California WIC Branch
Tila Madragal, California WIC Branch
Linda Malcom, Placer County Health Department
David Markell, California WIC Branch
Sonya McPhaul, California WIC Branch
Kelly Moore, Urban Indian Health Board, Inc.
Pattie Paddock, California WIC Branch
Patricia Perez, California WIC Branch
Diane Phillips, California WIC Branch
Mandeep Punia, California WIC Branch
Ivette Quinones, PHFE Management Solutions
Brenda Riddick, Planned Parenthood Orange County
Gayle Schachne, Northeast Valley Health Corporation
Karen Shevlin, California WIC Branch
Daisy Silverio, Delta Health Care
Ellen Sirbu, City of Berkeley
Poppy Strode, California WIC Branch
Karen Tabor, California WIC Branch
Erika Trainer, California WIC Branch
Michele van Eyken, California WIC Branch
Julie Wetmore, Butte County Department of Public Health
Lynda Young, Ventura County Health Care Agency

California Department of Health Services Key Informants

Peggy Agron, California Project Lean
Jim Carman, Physical Activity and Health Initiative
Chris Carson,
Lisa Cirill, California Center for Physical Activity
Sue Foerester, Cancer Prevention Nutrition Section
Alex Kelter, Epidemiology & Prevention for Injury Control (EPIC) Branch
Betsey Lyman
Donald O. Lyman, MD, Chronic Disease & Injury Control Division
Doug Robins
Susan Steinberg

Seleda Williams, MD, Office of Clinical Preventive Medicine
Gil Sisneros, California Nutrition Network, Cancer Prevention and Nutrition Section

ⁱ CA Dept. of Health Services, WIC Branch ISIS Data

ⁱⁱ CA Head Start Association Webpage, 2003 Program Facts

ⁱⁱⁱ RAND Research Highlights: The Health Risks of Obesity: Worse than Smoking, Drinking, or Poverty. RB-4549, March 2002.