



Fit WIC: Programs to Prevent Childhood Overweight in Utah Communities

Fit WIC Kits

Although physical activity is a part of all Fit WIC programs, Fit WIC Vermont specifically focused on increasing active physical playtime and decreasing time involved in sedentary activities in three and four-year olds regardless of weight status. During the assessment period in developing the Fit WIC programs, many WIC parents denied their child was overweight and did not recognize the child being overweight as a problem. In order to combat this belief, Fit WIC Vermont also focused on making this a family-based intervention.

In order to do this, Fit WIC Vermont addressed the barriers to physical activity faced by the WIC child in the form of a “tool kit,” which is a method that would be viewed as positive by participants. The Fit WIC Vermont designed an “Activity Kit” that aimed to increase outdoor playtime and decrease television watching time by WIC families as a whole. They implemented the use of this “Activity Kit” by counseling participants about the importance of physical activity and gave them a kit to support their behavior change at home.

Providing a Fit WIC Kit for each participant may not be realistic for Utah WIC clinics, but providing handouts on how to make your own Fit WIC Kit is. The following table includes materials found in Vermont’s Fit WIC Kits:

Fit WIC Kits	
Fit WIC Activities Book	Beach Ball
3 Bean Bags	Roll of Masking Tape
Maps	Bus Schedules
Storybook about active play showing ways alternative ways families can play without watching television	

The previous table just gives an idea of what a Fit WIC Kit can look like, and fortunately, there are a variety of materials that can be used in these kits. These kits are essentially a collection of tools that can be used to increase physical activity levels and skills in young children. Typically these kits were distributed to children of three and four-years of age during WIC certification visits or one-on-one client visits, but they could also be distributed during group classes.

Resources:

*Fit WIC Kit educational materials can be found here: <http://healthvermont.gov/wic/fit.aspx>

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Ten Ways your WIC Program Can Publicize New Health Insurance Opportunities

As millions of Americans become eligible for health insurance in 2014, WIC programs can play a vital role in sharing resources for learning how to get coverage and how to get help applying. Linking WIC participants to the health care they need is a fundamental WIC goal and local WIC programs are actively engaged in linking pregnant and post-partum women and young children to Medicaid. Now, other family members – including mothers who are not pregnant, fathers, older siblings, and grandparents, if they are under age 65 – may qualify for Medicaid, the Children’s Health Insurance Program (CHIP) or coverage through the new Health Insurance Marketplace. Open enrollment for the new Health Insurance Marketplace begins October 1, 2013, but as always, individuals may apply for Medicaid and CHIP at any time. The new coverage rules go into effect on January 1, 2014. Here’s how state and local WIC Programs can contribute to the outreach effort:

Spread the word

- Offer information about health insurance opportunities in WIC clinics and on WIC program websites.
- Display consumer materials from HealthCare.gov explaining the basics of Medicaid, CHIP and coverage through the Health Insurance Marketplace. Place them in clinic waiting rooms.
- Post the HealthCare.gov widget on the WIC program website.
- Invite trained speakers. Invite speakers from state health care agencies and health care service organizations to give reliable information on eligibility and getting help applying.
- Build on the WIC intake process. WIC programs routinely take steps to refer pregnant and post-partum women, infants and children to Medicaid, and making those connections is more important than ever, given the new coverage opportunities. In addition, the WIC intake process provides a chance to reinforce information about the availability of new health coverage for other family members.

Help WIC participants apply for health coverage

- Connect WIC participants with enrollment opportunities. WIC clinics operating out of community health centers, local health departments and community action agencies may be able to arrange for staff of these programs to help WIC participants apply for health insurance.
- Bring application assistance on site. Set up a time for trained helpers to provide assistance at the WIC clinic.
- Help spread the word that participants can apply online. All states will have online health insurance applications, and people will also be able to apply by phone, by mail or in person.

Promote promising practices

- Share successful ideas among WIC programs throughout the state. Collect strategies WIC programs are using to inform participants and their families about health insurance and to help them apply.

For more information about the Marketplace, visit HealthCare.gov, or call the Health Insurance Marketplace Call Center at 1-800-318-2596. TTY (phone service for hearing impaired) users should call 1-855-889-4325. Visit Marketplace.cms.gov for Marketplace widgets and badges and other partner materials.

Live Educational, One-Hour Webinar
Thursday, September 12th, 2013 from 1:30-2:30 EST
(Seating is Limited)

Speaker: **Fleur Bickford, BSc, RN, IBCLC**

Topic: **Breastfeeding & Social Media - A New Tool for Your Toolbox**

Fleur has worked as a maternal child nurse and lactation consultant for over 12 years. She currently maintains a flourishing private lactation practice in Ottawa, Canada. Fleur is very active in the lactation community as president of Ottawa Valley Lactation Consultants and a professional speaker whose talks and articles have been shared internationally.

Fleur is passionate about supporting breastfeeding families and helping mothers to reach their personal goals. When she is not working on her website and blog at [<http://www.nurturedchild.ca>,] www.nurturedchild.ca, she can often be found connecting with moms and professionals worldwide through Twitter (@NurturedChild) and Facebook (NurturedChild).

TOPICS INCLUDE:

- Who Uses Social Media? An overview of Twitter, Pinterest & Facebook usage in women of childbearing age.
- How can Healthcare Professionals & other Organizations use Social Media to Support Breastfeeding Mothers to Breastfeed Longer?
- How can I use Social Media? How do I Avoid its Pitfalls?

TARGET AUDIENCE: Any health care provider who supports breastfeeding moms.

IMPORTANT POINTS

- **Log-in information & number of attendees:**
 - ◇ You will be emailed log-in information approximately 2 weeks before the live webinar. When you receive this email, you will be asked to pre-register to make sure your “seat” is reserved and that you have GoToWebinar downloaded onto the computer you will be using to view the webinar. This can help you avoid any issues on the day of the live webinar.
 - ◇ This log-in information is unique to you and can only be used on one computer, so please do not share your log-in information. More than one person can view the webinar, in fact you can invite as many colleagues as you like. If you plan on having more than 3 viewers, we suggest reserving a conference room with a large screen so all attendees can view the content.
- **Continuing education credits:** If you wish to apply for continuing education credits through your institution or state board of nursing and need specific documents (content outline, objectives, etc.), please request these documents through your Ameda Sales Specialist. Ameda does not offer continuing education credits.

Contact Sandy Klein, Ameda Breastfeeding Products [505-710-1541](tel:505-710-1541) to preregister.

Pregnancy Risk Line / MotherToBaby



Avoiding Alcohol for Healthier Children

For the telephone counselors at the Pregnancy Risk Line / MotherToBaby UT, some of the most difficult calls are **the calls received from heavy** alcohol drinkers. Mostly we hear from women who've had a few drinks before they realized they were pregnant. We occasionally hear from women who have been told by friends, relatives, or providers that it was okay to drink 'some' alcohol during pregnancy.

For women who are alcoholics, heavy or 'problem drinkers', the message needs to be that they should not drink at all during pregnancy. Fortunately for those who aren't heavy drinkers, a drink or two in early pregnancy is not of concern. However, it is hard to 'tease out' in studies whether some women have risk factors that may put their fetus at risk even with low levels of alcohol. There could be genetic factors that, in combination with alcohol use, will affect the risk of miscarriage and the range of birth defects and developmental delays that encompass Fetal Alcohol Spectrum Disorders (FASD). Therefore, once a woman knows she's pregnant the best course is not to drink alcohol at all.

Women who are alcoholics with social and/or health problems related to their drinking should be encouraged to get into treatment. This is important since alcohol withdrawal can be dangerous for both the mother and her unborn baby. Moms can decrease the risk of development problems, including learning disabilities and behavior problems, related to FASD by quitting their drinking at any time in pregnancy. It is important to remember that no amount of alcohol is proven safe to drink during pregnancy; FASD is lifelong and never goes away; and FASD is 100% preventable by avoiding alcohol during pregnancy.

The Pregnancy Risk Line / MotherToBaby UT and the Utah Fetal Alcohol Coalition are promoting FASD Awareness Day, September 9th, to help families learn about the risks of consuming alcohol during pregnancy and to learn the signs of healthy child development. The Pregnancy Risk Line / MotherToBaby UT is available to answer questions about alcohol, medications, vaccines, or other exposures at 801-328-2229 or toll free at 866-626-6847. For more information about FASD and developmental milestones, visit the website at www.mothersbabyut.org.



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