



WIC NEWS

Special Supplemental Nutrition Program
for Women, Infants, and Children

Inside This Issue

LA Highlights.....	2
WIC Celebrations.....	3
Guide to Breastfeeding.....	3
Fathers as Allies.....	4-5
Public Comment Period.....	6
TEC Corner.....	6
EBT Transition.....	6
Nutrition 101.....	7
MWA Update.....	8
Infant Safe Sleep.....	9
E-Notice Recap.....	10-11
Birth Defects Outreach.....	11
Trainings/Events.....	12

September 2021

Note from the Director

Moving Forward with Momentum

Great news: It’s time to return to the office!

I would like to take a moment to thank you again for all your hard work, dedication, flexibility, and resolve over the past year.

When the World Health Organization declared the novel coronavirus a pandemic on March 11, 2020, we had very little information. We were unsure of how the virus spread, how sick we might become, and for how long the pandemic would last. All we knew was that in order to keep ourselves safe, we had to socially distance as much as possible, which meant staying home.

Throughout the unending uncertainty of the past year, our leadership team had one constant — dedicated employees willing to work with us as we explored ways to keep our operations afloat. Thank you for trusting in our ability to find new ways to continue to provide the best goods and services for our clients, all the while caring for our employees.

More than a year later, we’re finally ready to begin our return to work. I know this has been a particularly challenging time for us all. But we’re encouraged by the progress being made with the vaccine and the prospect of what’s to come. Finally, after many, many months, there is light ahead, and we’re so excited to welcome you back to the office as we “Move Forward with Momentum!”

Warmest regards and my very best,

Christina Herring-Johnson
WIC Division Director



This institution is an equal opportunity provider.



LOCAL AGENCY HIGHLIGHTS



Washtenaw County HD offered gift bags to WIC participants to celebrate 2020 World Breastfeeding Week and Black Breastfeeding Week. The gift bags included an insulated grocery bag, breastfeeding education materials, Breastfeeding: You Can Do It DVD, Washtenaw County Health Department swag, a face mask, and a sample of Mother's Milk tea!



InterCare Holland WIC staff doing drive-through Project FRESH!



Great Lakes Bay staff had fun at Advanced CPA Training on Red Nose Day!



Sanilac County HD staff got creative!

CDC HEAR HER CAMPAIGN UPDATE



A campaign one-pager that visually represents the 15 urgent maternal warning signs developed by the Council on Patient Safety in Women's Health Care is now available [here](#) in multiple languages.

This 8.5 x 11 poster of signs or symptoms that could indicate a potentially life-threatening situation is intended for pregnant people or people who were pregnant within the last year.

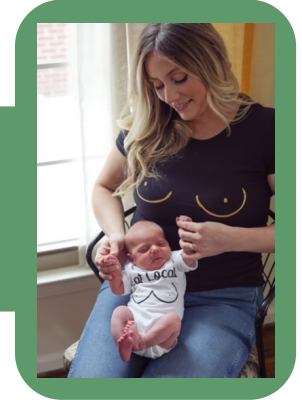


WIC CELEBRATIONS



Congratulations to Meryl Smith, State Contractor, on the birth of her first grandbaby, Jeremiah Smith Epstein, on February 14, 2021!

Congratulations to Lauren Cody of Macomb County Health Department on the birth of Frances Jane Williams on February 10th, 2021!



Congratulations to Kathy Bladow of St. Clair County Health Department on her retirement after many years in WIC! She will be missed!

YOUR GUIDE TO BREASTFEEDING

Have you ever looked in your breastfeeding brochure cabinet and felt consumed by the number of materials available?

Never fear, Your Guide to Breastfeeding is here!

This publication was created by the Office of Women’s Health (OWH). It is easy to read and offers how-to information on a wide range of breastfeeding-related topics including the benefits of breastfeeding, latching and positioning, making plenty of milk, how to know if baby is getting enough, common breastfeeding challenges and much more. Staff can share the full document or just the sections pertaining to a client’s specific concerns. Sharing through email or text offers a simple, paperless way of passing on such a terrific resource. We give this resource five stars for convenience to both local agencies and clients, as well as the quality of information provided and eye-catching graphics.



[Your Guide to Breastfeeding](#) is available as a PDF or you can download the ePub free of charge! The information contained in the publication is free of copyright restrictions and may be copied, reproduced or duplicated without permission of the OWH. The State is working hard to not only make this available through E-Forms, but to also make this resource available in Spanish and Arabic. Stay tuned!

FATHERS: POWERFUL ALLIES FOR MATERNAL & CHILD HEALTH



“Maternal and child health programs and professionals have become increasingly more cognizant of how fathers, specifically, affect their children’s health and development,” says NICHQ President and CEO Scott D. Berns, MD, MPH, FAAP. “Moving this conversation forward, and highlighting strategies that support father engagement and involvement, is a critical opportunity to improve children’s health outcomes in the decades to come. This is not because fathers matter more than any other primary caregiver; rather, it is because they *do* matter but there are barriers getting in the way of their involvement—barriers that can be overcome.”

Evidence demonstrates that fathers play a critical role in children’s health and development, beginning in the prenatal period and continuing through early childhood and adolescence. When fathers are involved during pregnancy,

mothers are 1.5 times more likely to receive prenatal care in the first trimester, which has positive implications for both maternal and infant health. During infancy, fathers can support mothers in breastfeeding and in following safe sleep guidelines, both of which can reduce infant deaths. Fathers also play an important role in supporting children during early childhood, in terms of executive function and social emotional development. And during adolescence, father involvement translates to better outcomes in school and a reduced risk of teen pregnancies.

Yet, despite this evidence, fathers still face significant barriers to involvement, including systemic obstacles related to employment, and a lack of confidence stemming from social stereotypes about the expected role of a father—namely that their role is somehow secondary to the mother’s.

Just as this article focuses on engaging fathers, NICHQ urges public health professionals to seek solutions that support all caregivers: mothers, fathers, stepparents, grandparents, siblings, aunts, uncles, and the many other members of the diverse family structures that nurture children.

“The mother-child dyad is an incredibly powerful and nurturing relationship.” says Berns, “And the special relationship with fathers matter too. I don’t think any of those of us working in maternal and child health intend to undervalue or reduce the father’s role, but sometimes this is an unintended consequence of prioritizing the mother-child dyad. Right from pregnancy, we can take steps to change that, and better support dads as powerful allies in both mom’s and baby’s health outcomes.”

Empower fathers as advocates for their children’s health

“I think many fathers know they’re important and their presence matters,” says Berns. “But we should do more to impress upon them just how big of a difference they make—not that they are just a supportive addition but that their actions and attitudes really will affect the lifelong health of their children. Intentionally talking to fathers about their impact and what they can do at every stage of their children’s lives will empower them as champions for children’s health and well-being.”

For example, Berns points out that health professionals can empower new dads by describing what they can expect after birth, how to support both mom and baby at home, and ways to bond with their new baby. Engage fathers in conversation about safe sleep guidelines and have them practice putting their baby to sleep safely. Talk with fathers about how they can help moms who are breastfeeding, such as learning how to recognize when their baby is hungry and helping moms get much needed rest. Recent research also shows that when fathers practice skin-to-skin care, where the father holds the baby closely against his bare chest, it can support the health of the baby and facilitate father-child bonding—health professionals can help fathers practice this in hospitals immediately after birth.

Similarly, during well-child visits, pediatric health professionals can engage fathers in conversations about safe sleep, breastfeeding, father-child bonding, and early childhood development. Describing how fathers, specifically, can support children’s cognitive, social, and emotional development is essential, adds Berns. This shows that their role is additive from moms and has real impact.

- 4 Critically, these conversations can happen in the community as well as during hospital and healthcare visits, says Berns.

“We need to provide fathers with as many touchpoints as possible, which is why partnering with community sites and organizations is so important. We see this in both our infant and early childhood improvement efforts. Consider how Arkansas’ health department activated men as safe sleep champions by partnering with fraternities; or how Oklahoma transformed a local barber shop into a site for early childhood learning and parent education. These innovative solutions are elevating fathers, grandfathers, uncles, and men in their communities as children’s health advocates.”

Pursue system changes that support father-involvement

System improvements, both small and large scale, can also encourage father involvement, says Berns. For example, while both mothers and fathers often work full-time jobs, mothers are still generally the primary parent attending well-child visits, which means many fathers often don’t spend as much time with their pediatric provider—a critical resource during those early years. Creatively thinking about the well-child visit can help pediatricians better engage and empower fathers.

“Offering office hours outside of regular work hours, asking families to try to find times when all caregivers can attend when scheduling visits, including working partners through video chat, developing father-focused resources that can be sent home, and sharing information on father support groups during the well-child visit—these small process improvements can go a long way towards preparing all caregivers for parenthood,” says Berns.

At the state level, health professionals and advocates can work to support paid family leave, so that both mothers and fathers are guaranteed time with their newborn during those critical early months. Giving fathers dedicated time with their children immediately after birth provides the foundation for a healthy father-child relationship and ultimately improves outcomes for children.

Include fathers in two-generation approaches

Leveraging two-generation strategies that account for the needs of fathers will support the health of children. After all, we know that a child’s health is inextricably linked to the health of his or her caregivers—this means mothers *and* fathers.

“We can’t think of the dyad as just mother-child. It needs to be the caregiver(s)-baby dyad,” says Berns. “Supporting families holistically means thinking about fathers, and specifically what might be adversely affecting their health.”

One father-focused two-generation approach is to screen for paternal depression, as well as maternal depression, during well-child visits. Fathers have a nearly five percent risk of paternal depression during the postnatal period, and that risk increases over the first five years of a child’s life. Like maternal depression, paternal depression is associated with adverse developmental outcomes for children, especially if the mother is also depressed, which means screening fathers and referring them to supportive services may improve both paternal and child outcomes. Similarly, pediatric health professionals can talk with fathers about other social determinants that influence health outcomes, such as their employment, housing stability, and alcohol and drug use.


“As a dad, I know what it feels like to think about the things you missed and wish you’d found more ways to be involved,” says Berns. “We can do more to help fathers and children benefit from rewarding father-child relationships. Dads deserve a health system that encourages their involvement, and children deserve every possible ally in their lives.”

Source: <https://www.nichq.org/insight/fathers-powerful-allies-maternal-and-child-health>

SUPPORTING FATHERS’ MENTAL HEALTH




Did you know?

- **One in 10** fathers get Paternal Postpartum Depression (PPPD);
- Up to **16 percent** of fathers suffer from an anxiety disorder during the perinatal period.




Helping dads be at their best—physically and mentally—during early childhood has a big impact on children’s health.

Studies show that FATHER INVOLVEMENT LEADS TO CHILDREN WHO:

<p>are more ready for school</p> 	 <p>have a better vocabulary</p>
<p>have better social skills</p> 	 <p>are better able to regulate their emotions</p>

FATHER INVOLVEMENT HELPS MOMS TOO

- It increases both parents’ confidence
- It helps both parents be more responsive to their baby
- It decreases mothers and fathers’ potential for mental health issues



How Can Health Professionals Help Fathers?

1. Screen for paternal depression during well-child visits
2. Connect dads with resources and interventions

REFERENCES
<https://www.ncbi.nlm.nih.gov/pubmed/26590515>
<https://jameerwork.com/journal/ameerwork-abstract/189905>
<https://pediatrics.aappublications.org/content/138/1/e20161128>

NICHQ
National Institute for Children’s Health Quality

PUBLIC COMMENT PERIOD HIGHLIGHTS

“My name is Crystal R. and my twins have had WIC since 2018. I really appreciate the WIC program because it has helped me, as a single parent, with the simple and most valuable things.”

“To me I think they are doing really wonderful. I don't see anything that they can do better. Five years is enough help. I personally want to use this opportunity to thank you for this program. You have no idea how much I appreciate WIC. It helped me so much and saved me the money that I didn't have. I would have more credit card debt if it wasn't for WIC. Thank you!!”

“I never had a complaint regarding the way the agency conducts their service. When there was in-person service, I was always seen at my scheduled appointment time. I feel you're doing a great job!”

“You guys are awesome! No improvement needed and thank you for your help and answering any questions I might want to know about my child.. Have a wonderful and blessed day.”

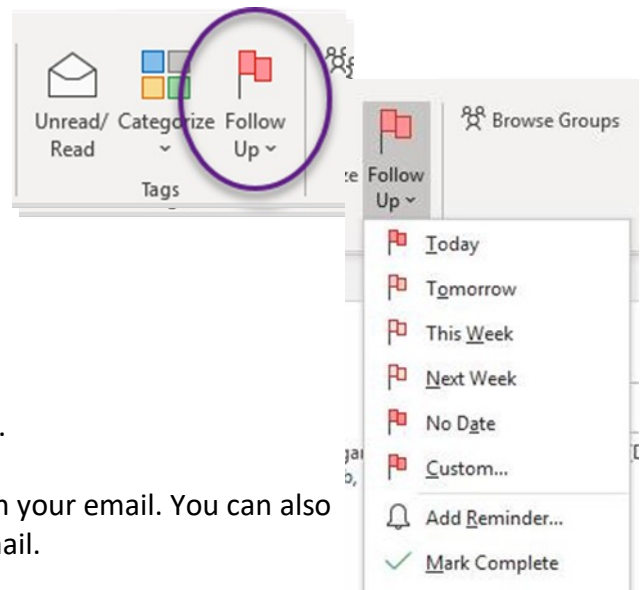
“TEC” CORNER

In the March 2021 WIC News, we showed you how to use Folders and Rules to organize Outlook E-Notices. Now we would like to show you what you need to do to flag your emails.

Do you mark some of your emails as Unread so you will be reminded to go back to them? Flag your emails to remind you:

- Go to the Home tab in your emails and click “Follow Up”.
- Click on the arrow and decide when you want to follow up.

This will put it in your To-Do or Task List and change the color in your email. You can also click “Add Reminder” to set a time to follow up or read that email.



ELECTRONIC BENEFITS TRANSFER (EBT) TRANSITION

Due to unforeseen circumstances during the EBT Transition, the State of Michigan is delaying the conversion from Conduent to FIS/CDP. The EPPIC/Conduent system has been reactivated, and a new conversion date is currently being determined. The EBT Conversion is now expected to occur in late September or mid-October. We will share updates as they become available. We will continue to use the EPPIC system for the time being.

Please continue to use your existing EBT card stock. Do NOT use the new EBT Cards until the changeover is complete.

If you have any questions, please send them to MDHHS-WICEBTQuestions@michigan.gov. For additional information, please refer to www.Michigan.gov/WIC and select EBT Transition.



Providing Nutrition Services to Culturally Diverse WIC Families

Building a Cultural Framework

By Samantha Mann, GVSU Intern

Culture is engrained in us all. It's our self-expression. It encompasses our values, morals, customs, spiritual traditions, mental processes and learning, beliefs and attitudes, communication, language, relationships, skills, food, clothing, and where we come from. Learning and respecting these cultural differences is essential when working with people from diverse cultures.

Cultural Awareness starts with self-awareness. It's a reflection of one's self in relation to others and how we develop sensitivity to differences and similarities. By being respectful of others and accepting people's values, customs, and practices, even when they are different from our own, we allow ourselves to develop more successful relationships, both personal and professional.

Interacting with **Cultural Competence** implies having a broader understanding of culture and not generalizing, stereotyping, or oversimplifying. By becoming more aware of our own cultural beliefs and practices, we can improve our ability to communicate and interact with people across cultures by understanding and respecting their customs, values, and beliefs. It's helpful to be mindful of culture fluidity, recognizing that cultures are not static or homogenous. Cultural competence is not a skill to master, but rather a goal for how to provide quality care in a diverse setting.

Cultural Humility places emphasis on the individual. It is a mindset that prioritizes learning from people, and our clients, by actively listening to them. We accept that we don't know everything and that it's okay to ask questions. It's our willingness to suspend what we think we know about a person based on generalizations about their culture. This mindset encompasses a symbiotic relationship between two individuals. You are not the teacher, but rather, the student.

The Wisconsin Center for Public Health Education and Training shared a HUMBLE model, each letter highlighting values and practices that will help you apply cultural humility to your personal and professional lives. Incorporating this mindset into your daily life can positively impact your public health experience.

CULTURE

.....
AWARENESS

.....
COMPETENCE

.....
HUMILITY



HUMBLE Model

H- Be **humble** in the assumptions you make about people and the world

U- **Understanding** how your own culture can influence your thoughts and interactions

M- **Motivating** yourself to learn and ask questions

B- **Beginning** to incorporate this knowledge into your life

L- **Lifelong** learning, because remember this is a mindset not an end goal

E- To **emphasize** and establish respect in your interactions

References

1. Palmer, Sharon. "Cultural Humility in Food & Nutrition." *Today's Dietitian*, Feb. 2021, Vol. 23, No. 2, P. 24
2. WiCPHET. Cultural Awareness: Introduction to Cultural Competency and Humility. Cultural Awareness: Introduction, Wisconsin Center for Public Health Education & Training, 2020, wicphet.org/sites/default/files/courses/cultural-awareness/introduction/story_html5.html.

MICHIGAN WIC ASSOCIATION—WE'RE STILL HERE!

Hello everyone! I apologize for the lack of communication from MWA during COVID. We have all had our hands full in our clinics. Our mission is to act as a vehicle for sharing ideas, advocacy, and best practices on planning, operations, coordination, implementation, and administration of the WIC Program.

Fortunately, we have had our coordinator calls and small group discussions, facilitated by Amy Thompson, which have kept us all connected. These meetings also helped to inform me of activities that were occurring throughout the state, particularly related to our response to the COVID pandemic. This has been extremely important in my communications with the National WIC Association (NWA).

During the past year, I have participated monthly in the NWA Midwest Regional meetings. Each month we meet to discuss topics important to local agencies in our states. Our Midwest Regional Representative also brings to us things that NWA would like our input on. I have reached out to some of you on these topics, and I have forwarded emails as well when needing input from you. Additionally, I participate in the monthly meetings of the State WIC Associations NWA workgroup. This group focuses more on legislative activity and often requests our input in signing on to support legislative efforts that benefit the WIC Program. I have forwarded several of these emails to you. Thank you to all who responded and got them the information they were looking for. The most recent email requested staff input on the difference WIC makes. An email seeking client input will be coming soon.

I also had the opportunity to meet with a few legislative teams at the National WIC Association Hill Advocacy Day in February. Along with State WIC staff, we met via Zoom and conference calls to educate them about the importance and impact of the WIC Program nationally, within our state, and specifically to the area they were each representing. We also helped them understand how they can advocate for the WIC Program and make a difference depending on what committees they serve on. I was also able to share some things from the local agency perspective. It was a great experience! I hope one day we can return to doing these in person.

We are behind on holding our elections. Your current board and our contact information are below:

- Chair—Tracie Bolton—Ingham County—tbolton@ingham.org
- Chair-Elect—Vacant
- Secretary—Abby Hess—Kent County—Abigail.Bishop@kentcountymi.gov
- Treasurer—Lynn Kuligowski—Community First—kuligowski@communityfirsthc.org
- Regional Representatives:
 - Region 1—Vacant
 - Region 2—Anne Bianchi—DHD 10—abianchi@dhd10.org
 - Region 3—Veronica Pearson—Kalamazoo County—vmpear@kalcounty.com
 - Region 4—Martha Brooks—Macomb County—martha.brooks@macombgov.org

As you can see, the Chair-Elect position is vacant. The Chair-Elect assists the board Chair in fulfilling obligations of the office by performing such duties as requested by the board Chair. If you are interested in serving in that role, please contact one of the board members above. Thank you all for the amazing work you have all done in serving our WIC families during COVID! You are all appreciated and valued for the work that you do! Please reach out to any of our board members with questions or concerns related to our mission. We are here to serve you!

Best regards,
Tracie Bolton, Chair

OCTOBER IS: INFANT SAFE SLEEP AWARENESS MONTH



October is Infant Safe Sleep Awareness Month in Michigan. It is the perfect time to get involved to promote infant safe sleep. Check out some [ideas](#) on how you can promote safe sleep in October and every month. Can you commit to one action from the list?

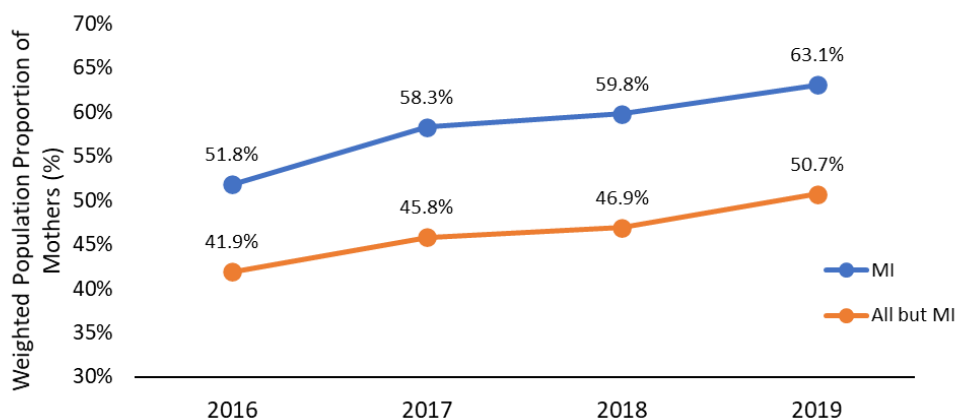
You can also hear about what others are doing for Infant Safe Sleep Month by joining our webinar, “Getting Ready for Infant Safe Sleep Awareness Month,” on September 9, 2021 at 1 p.m. You can [register](#) now. Nationally, October is also SIDS Awareness Month. Check out what the [Safe to Sleep® Campaign](#) is doing to help spread the word. Take time to promote infant safe sleep in your community - educate your clients, friends and family.

We would also like to share that your efforts to educate families about infant safe sleep are paying off! According to the Pregnancy Risk Assessment Monitoring System (PRAMS), for each of the last four years (2016-2019), Michigan has led all other PRAMS states and territories in the proportion of mothers who sleep their babies in spaces without loose or soft bedding. While this practice has improved over time across all PRAMS sites, the rate of improvement by Michigan mothers has kept pace, allowing us to remain ranked first each year (Figure 1). As you know, keeping baby’s sleep space free of items, including blankets, comforters, toys and pillows, is a key component of infant sleep safety.

The proportion of moms placing their infants to sleep in spaces without toys, pillows, bumpers, or other loose bedding has improved from 51.8% in 2016 to 63.1% in 2019, a gain of 11.3 percentage points. Data pooled among all other PRAMS states, districts, and territories from these same years show that the proportion of moms placing their infants to sleep in spaces without toys, pillows, bumpers, or loose bedding has collectively improved from 41.9% in 2016 to 50.7% in 2019, a gain of 8.8 percentage points.

While there are still improvements to be made, we celebrate the high number of Michigan mothers who choose to sleep their infants without loose or soft bedding. Keep educating families about safe sleep and providing support when needed. Your efforts are making a difference.

Figure 1: Mother Sleeps Infant Without Blankets, Pillows, Toys, Bumpers
MI vs All Other PRAMS Sites, 2016-2019



PRAMS is a project that gathers high quality, population-based data about maternal attitudes and experiences before, during and after pregnancy. Forty-seven states participate in PRAMS, representing 83% of all live births. Learn more about PRAMS at www.michigan.gov/PRAMS.

To learn more about infant safe sleep or to find a variety of resources, visit www.michigan.gov/safesleep.

STATE UPDATES - E-NOTICE RECAP

Policies and Procedures:

- #2021-26: WIC Coordinator Connections Meeting—See email attachment for 1/27/21 meeting minutes.
- #2021-43: Anthropometric and Laboratory Information Request form now available – Click [here](#) to access the form.
- #2021-47: WIC Remote Services Guidance Document – NEW Updated Version 7 – See E-Notice for pertinent updates.
- #2021-59: Training Prerequisite Update – Click [here](#) to view prerequisites.
- #2021-81: Destruction of WIC Records – See E-Notice for a detailed explanation of MI-WIC Policy 1.06.
- #2021-85: Release form for clients to allow sharing information with Health Care Providers – Click [here](#) to access the form in English, Spanish, and Arabic.
- #2021-95: WIC Consultant Assignments – Revision – See attachment for assignments.
- #2021-114: Resources for Laboratory Skills and Ordering Controls – See E-Notice for lab skill competency resources.
- #2021-125: WIC Coordinator Connections Meeting - See attachment for 5/19/21 meeting minutes.
- #2021-133: High Importance - Local Agency Returned Formula Log - All returned formula must now be documented into MI WIC on the Formula Acceptance and Action Log.
- #2021-139: Competency Checklists – See E-Notice for several resources.
- #2021-141: New Income Guidelines Effective June 30, 2021 – Click [here](#) for updated guidelines.
- #2021-145: WIC Coordinator Connections Meeting - See email attachment for 6/23/21 meeting minutes.

Nutrition:

- #2021-32: Feb. 25th New Food Guide Webcast and Live Q&A – Click [here](#) to view the webcast.
- #2021-55: Nutrition Education Workgroup Follow-up Resources – See attachments for meeting minutes and materials.
- #2021-112: Nutrition Networking Call, May 13th Follow-up + Date Change for NEWG to July 22 – See attachments for meeting minutes and materials.
- #2021-127: Recall and Discontinuation of Beech-Nut Single Grain Rice Infant Cereal - Beech-Nut has decided to discontinue Beech-Nut branded Single Grain Rice Cereal (8oz).
- #2021-130: Infant Formula Manufacturer Contract – Award Recommendation – Joint Evaluation Committee recommended that Abbott Laboratories Inc. be awarded the WIC infant formula contract for the five-year contract term beginning November 1, 2021, through October 31, 2026.

Vendor:

- #2021-31: WIC Vendor Updates – Click [here](#) to watch the webcast that covered EBT transition, new Food Guide, and Minimum Stock Requirements.
- #2021-57: Spring 2021 Vendor Newsletter – Click [here](#) to view.
- #2021-150: Summer 2021 Vendor Newsletter – Click [here](#) to view.

Events:

- #2021-60: Coordinator Summit 2021 – Virtual Announcement - The October 25 Record Review training and the October 26-27 Coordinator Summit will be virtual.

Grants:

- #2021-54: Michigan WIC awarded Tufts THIS-WIC Telehealth Grant – See E-Notice for project details.

Data and Systems:

- #2021-30: New WIC Card Design – New design created by Rachael Windemuller.
- #2021-48: FY 2020 WIC Food Costs – See attachments for charts detailing the food dollars spent by WIC participants.
- #2021-102: WIC Client Connect Local Agency and User FAQs – Click [here](#) for Local Agency FAQs and [here](#) for Client FAQs.
- #2021-107: Referral Category Changes – See E-Notice for details.
- #2021-124: Integrated Service Delivery Resources – ISD Resources and webcast added to MPHI [website](#).
- #2021-136: WIC Connect Mobile App Issue – See attachments for a detailed workaround.
- #2021-146: Release 8.3 Known Post-Release Bugs & Alternate Resolutions – See E-Notice for details.

STATE UPDATES - E-NOTICE RECAP

Breastfeeding:

- #2021-45: Breastfeeding Food Packages, ME Assistance, Role Update, Equity Trainings – See E-Notice for updates.
- #2021-71: Biannual Breastfeeding Report – See attachments for the Fall 2020 and Spring 2021 Biannual Breastfeeding Rate and Duration Reports.
- #2021-83: April Breastfeeding Information – See E-Notice for pertinent updates.
- #2021-93: Additional Breastfeeding Information – See E-Notice for pertinent updates.
- #2021-108: Breastfeeding Peer Counselor Enhancement Project and Breastfeeding Connections May 2021 – Click [here](#) for the newsletter.
- #2021-120: Breastfeeding Work Group, Equity Training, PFAS in Breast Milk – See E-Notice for pertinent updates.
- #2021-143: Breastfeeding Connections July 2021, Breastfeeding Work Group Date Changes, Peer Trainings, etc. – Click [here](#) for the newsletter and see E-Notice for additional updates.
- #2021-152: Breastfeeding: New Regional Lactation Consultant Assignments - Shonte' Terhune-Smith, BS, IBCLC, CLS has replaced Winnie Webb as the South Central Regional LC.

Legislation and Partner Updates:

- #2021-23: Consolidated Appropriations Act, 2021 – Clarification of Income – Stimulus payments are not considered income when determining WIC eligibility, but unemployment benefits are.
- #2021-27: COVID Vaccine Support Materials – See attachments for MDHHS materials in multiple languages.
- #2021-28: Heavy Metals in Infant Foods – See E-Notice for talking points.
- #2021-40: FDA Advises Parents and Caregivers to Not Make or Feed Homemade Infant Formula to Infants; Food Bank and Pantry Resources – See E-Notice for full FDA update and resources.
- #2021-86: Free Cancer and Health Screening Opportunities – See E-Notice for details on the Breast and Cervical Cancer Control Navigation and WISEWOMAN programs.
- #2021-87: Update on Public Charge - As of March 9, 2021, DHS no longer applies the August 2019 final rule on public charge.
- #2021-98: WIC Income Exclusions under the American Rescue Plan Act of 2021 - Rebate payments and child tax credits are not considered income when determining WIC eligibility.
- #2021-110: NWA Publishes RD Recruitment & Retention Survey Report – Click [here](#) to access.
- #2021-149: Magellan Diagnostics Recalls LeadCare II, LeadCare Plus, and LeadCare Ultra Blood Lead Tests – See E-Notice for details.

Promotion and Retention:

- #2021-119: Promotion and Retention Workgroup Meeting Minutes – May 14, 2021 – See attachments for meeting minutes and materials.

BIRTH DEFECTS EDUCATION AND OUTREACH

Every 4 ½ minutes a baby is born with a birth defect. We know that not all birth defects can be prevented. But we also know that women can increase their chances of having a healthy baby by managing health conditions and by adopting healthy behaviors before and during pregnancy.

The Birth Defects and Education program would like to extend an opportunity for **free** educational outreach materials available to order. Topics include education on folic acid, preconception tips, and resources for families of infants and toddlers with special needs. The materials are available in English, Spanish and Arabic.

Please visit <https://migrc.org/order-materials/> to submit your order.



Progress in research brings hope for new treatments and cures each day. Babies with birth defects are living longer and healthier lives. This is thanks to education, newborn screening, early diagnosis, special care and new medical treatments.

Michigan Department of Health
and Human Services, WIC Division
Elliott-Larsen Building
320 S. Walnut St.
Lansing, MI 48913

Questions/Comments
E-mail: JacksonW6@michigan.gov



PLEASE
PLACE
STAMP
HERE

UPCOMING EVENTS/TRAININGS/WORKGROUPS

September

1, 2, 16: Lactation Counselor and Educator (LCE) Training
7: Vendor Webcast
14: Pharmacy Training Webcast
14-16: BF Basics
16: Nutrition Ed Workgroup
17: Promotion & Retention Workgroup
21: BF Peer Update
23: Income Webcast
28-29: CPA Training
30: Vendor Update Virtual Discussion

October

7: Customer Service Local Agency Webcast
12: BF Coordinator Training
13: BF Peer Manager Training
15: BF Workgroup
19: Lab Training
20: Anthro Training
20: Vendor Regional Forum
22: Milk Expression—Okemos, MI
25: Record Review Training
26-27: Coordinator Summit

November

3-4: Clerical Training
10: BF Regional Peer Training
16-18: BF Basics
30: CPA Training

Visit [MPHI](#)
to sign up for trainings!

*All events, trainings, and workgroups will be conducted virtually until further notice. Additionally, training dates are sometimes adjusted. Please be sure to verify training information on MPH's [WIC Events Calendar](#), as this list may not reflect the final schedule.