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Excerpts and Summary of the 42nd Hunger and Nutrition Forum
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The following is a summary of the reports made at the forum compiled by Edie Jessup and Carey Berend.

HUNGER AND NUTRITION FORUM #42
Wednesday, March 10, 2004
Focus: WIC – a Smart Program for Fresno

Welcome and Participant self introductions.

Edie Jessup, Coordinator, Fresno Metro Ministry Hunger & Nutrition Project: Our focus today is on the Women, Infants, and Children Federal Nutrition Program. The research that ties much of obesity to low income and lack of access to adequate food is pouring in and it's very critical that we encourage all of the people that we work with and those that we know to utilize the federal nutrition assistance programs. WIC (Women, Infants and Children) Program, which we are going to hear about today, is one of the premier programs. The only fault I can find with the WIC program and the pattern of delivery is that it is a capped program. It is not an eligibility-based program. This is something that of all things we could change would make such a huge difference. If WIC were an eligibility-based program so that all mothers and their kids and families could have access to this really good program that ties good food to good health education. The other piece is that those families that are eligible for WIC should also be utilizing the other federal nutrition programs. That includes food stamps if they are eligible and it includes making sure that kids have breakfast and lunch at school. The school nutrition programs are critical for the older brothers and sisters of families that are on WIC. It's very important this summer that we see that kids are getting food during the summer months through the School Summer Lunch Program, and we need more sites in our county for summer lunch so kids can eat while school is out. People need to fully utilize federal nutrition programs. The senior programs also are very critical and they're under utilized here in Fresno. Finding ways to get people food that is healthy for them is really, really important.

I want to introduce my friend Beth Arrindell, who is going to talk to us about WIC. We are going to have the great opportunity of having some WIC dietitian interns working with Metro later this spring and later in the year and I'm very much looking forward to that.

Beth Arrindell, Registered Dietician, WIC Program: My name is Beth Arrindell, and I am a Registered Dietician for United health Centers WIC Program. In the Central Valley we have a number of programs starting up. In Merced we have Merced Community Action Agency WIC, and then we have the Madera County WIC, Fresno EOC WIC, and ours is United Health Centers WIC. We serve the southern Fresno County rural community. We have nine sites starting at Orange Cove, Reedley,

Parlier, Selma, all the way to Huron and Riverdale, so our agency is spread out. In addition I wanted to let you know that I brought pamphlets and some of our nutrition education materials, so help yourselves. Some of them are English and some Spanish language. If you ever want any of the nutrition pamphlets for your program feel free to take them; and there are several statewide California WIC internet sites that you could go to if you wanted to order more.

What is WIC? In the long term, WIC is the special supplemental nutrition program for Women, Infants and Children. It provides a number of things such as nutritious foods via checks, which we call vouchers, nutrition counseling, breastfeeding promotion, support and referrals. One of the things we try to do, although we need to improve, is to continue to refer our participants who aren't already enrolled and are eligible for food stamps or Medi-Cal. We were established in 1972 as a pilot program, but because of its success it's been reauthorized nine times.

One of the goals for the WIC program is to reduce the complications of pregnancy. We know that women who are malnourished tend to deliver babies that are too small and too early. We also want to reduce iron-deficiency anemia in women, infants and children. How many of you have had kids? Has anyone experienced anemia, low iron? It's hard. We lose a lot of blood during delivery, so we want to make sure that our participants have a good iron level in their blood. Another goal is to decrease the prevalence of low birth weight infants. We know that a low birth weight baby in terms of cost starts at about \$25,000 in a hospital setting and goes up from there. We also know that with WIC we can reduce the chances of low birth weight infants and overall reduce medical costs. Finally, we want to promote optimum growth and development of infants and young children.

Who does WIC serve? In terms of numbers nationally WIC serves 7.5 million low income people and has a budget of about \$4.5 billion. California is not necessarily the largest state, but we have the largest WIC program. We serve 1.5 million participants on a budget of about \$800 million. WIC employs 3,000 employees in California, and WIC is the largest employer of registered dietitians like me in California. In California our caseload reflects the Central Valley to some extent. Seventy percent are Latinos. Fifteen percent white, ten percent African American, and one percent Asian. For every one dollar spent in the WIC program, \$3.14 is saved in medical care costs.

WIC serves families who are at 185% of the poverty level or lower. These families are at increased risk for poor nutritional status, and that, of course, can lead to negative medical outcomes and poor school performance. We know that a woman who is pregnant and has untreated anemia may have a preterm or low birth weight baby, and all it takes is a small amount of special food to help reduce the chances of her getting anemia. We also know that a child with untreated

Anemia during early childhood may have trouble learning or do poorly in their schoolwork.

How does someone qualify for WIC? Enrollment is based on two things, nutritional risk and financial level. We are able to serve families with incomes at less than 185% of the poverty level. For example, 185% of the poverty level is roughly \$42,800 a month for a family of four. Of course, as the family size increases the allowable income level increases as well.

What does someone receive who is on the WIC program? First and foremost, we are nutrition education based. If somebody comes in they receive both individual personalized education and group education. Someone will come in for their first appointment and we'll do a 'diet recall'. We'll ask them to write down what they've been eating or what their child has been eating and then they meet with a WIC nutrition assistant. If that nutrition assistant determines that the person is at some nutritional risk, then they are sent to a Registered Dietitian, someone like myself.

A Registered Dietitian goes through four or five years of undergraduate work. We graduate with a degree in nutrition and then we do a one-year internship and take a registration exam, so we work

really hard and we consider ourselves nutrition experts. That's why we would see our severely overweight kids and our women with diabetes and other medical conditions. We also do some group education. We do group classes and we use some of the materials there in the back. **We used to do lecture style classes but we realized that we need to get people more involved, so in 2000 the State of California revitalized their nutrition education. We now present healthy information to parents, but we don't want to forget the kids and we realize that as we involve the kids we can model the preschool education methods and techniques for those parents to take home.** Every class involves reading a children's book, counting, identifying colors, and movement of large and small motor muscles. Of course, the muscle movement is also good to **encourage physical activity and address the issues of overweight and obesity in kids.** *For example, in the back you can see those three big juice bottles. They're 64 ounce juice bottles. We know that parents can't always afford to go out and buy toys so we developed a bowling game with those juice bottles and then we use a sock or something. This gets kids up and moving and it uses the things that people already have at home.*

In addition to that, **they receive food packages in the form of a special voucher or check and the vouchers will include milk, cheese, juice, cereal, eggs, dried beans, and peanut butter. That's for everybody over the age of one and our pregnant and postpartum moms. If the mom chooses not to do formula but is solely breastfeeding she'll also receive carrots and tuna to supplement vitamin A and protein. For infants they receive baby cereal. Formula is an option.** We are mandated to offer that to our participants, but we give a lot of breastfeeding education and support as well.

WIC is established to supplement 60% to 100% of the RDA for protein, vitamins A and C, calcium, and iron because that's what we realized our population at that time was missing, and we needed to do it in a way that we could administer nationwide. In terms of cost, the package that we offer now is about \$60 to \$70 for our kids over age one and for our pregnant moms. **For infants, of course, the formula is outrageous.** It's \$10 to \$20 a can, so that's why our infant package, if the mom is taking formula, is so expensive. We do get rebates from our contract formula companies, so it's not all out of pocket.

I want to give you an example of exactly how much food these kids are getting. We've grouped kids into ages 1 to 2 and then 3 to 5. **Our kids ages 3 to 5 would receive 4.5 gallons of milk, two pounds of cheese, two dozen eggs, three 64-ounce bottles of juice, which can be frozen or canned, 36 ounces of cereal, and a pound of dried beans or a jar of peanut butter per month.** You can see that the milk and cheese provide the calcium and the vitamin A, the eggs provide the protein, and the juice is a source of vitamin C. Do any health problems come to mind when you think of kids and juice? **Lots of sugar. We need to find other ways to get that vitamin C to kids. We're finding a lot of dental caries. In the 1970s we were eating differently but now we've changed so we're looking to change that. The beans or the peanut butter provide the protein and the iron. In addition, we provide support and help with breastfeeding and referrals to healthcare and other resources.**

We, too, are **facing obesity and diabetes. I am the one who sees the 80-pound two-year-olds.** We are the ones who are on the **front line talking to parents and encouraging physical activity, so we incorporate activity into every single one of our group classes.** We get our parents up and moving, whether it's to music or to games. We want to model that behavior, but **at the most we have half an hour with this family every month.** We are also doing statewide pilot testing of physical activity programs. One of them is called **Fit WIC.** It's now pilot tested in Los Angeles, but they're looking to bring some of those activities to the school level as well as to WIC.

Dental caries are the number one epidemic in children and so in an effort to prevent that we encourage breastfeeding because we know breastfed kids have a much lower incidence of

dental caries. We encourage weaning at age one. We do a lot of staff training. I've been to two oral health trainings so far this year, **and we do a lot of referrals to local dental care.** In our area of rural Fresno County many of our dentists don't want to see the young kids, but we do refer them to Dr. Leslie. He does see young kids including those who have severe dental problems.

As Edie mentioned, *we are starting our own training program for registered dietitians. We have a lot of graduates from Fresno State who have their four-year nutrition degree, but to become a dietitian you have to do a one-year internship where you're working in the field. You have to work in hospitals, food service, WICs, and programs like this one.* Three of the four of our ladies up here are from the Fresno area and one is from San Jose. We are training them this year so that by next January they'll be ready to take the registration exam and we're hoping that they choose to stay and work for WIC or in community nutrition programs like these.

What are some potential changes for the future? **We're definitely looking at vouchers for fresh fruits and vegetables.** We know now the tremendous impact that consumption of fresh fruits and vegetables can have. **We do a lot of outreach for and with the 5 A Day program, so we encourage families to eat the five fruits and vegetables a day. We also for several years have been giving vouchers in the summertime for farmers' market programs. Our challenge is that the farmers' markets have to be certified in WIC because they're special vouchers. They're not the ones we usually print out. Unfortunately, sometimes some farmers' market programs believe that there is a stigma associated with having WIC participants.** We've definitely worked in our rural areas to get farmers' markets to participate, and I believe the Fresno WIC has one or two farmers' markets in our area who do participate. We're looking to expand that, but as you know, with funding cuts we've definitely had to fight to keep that program alive.

We know that many, **many of our participants are lactose intolerant and yet we continue to provide regular milk. WIC can provide lactose-reduced milk or acidophilus milk. We can print those kinds of coupons on our checks, but we really feel and most folks feel that we need to provide a soy alternative to our participants.** But as you know, at the federal level change takes a long time. California is on the cutting edge. We are usually the first in the nation to be looking at change, but it *takes about ten years for things to happen at the federal level*, so we are talking to them about it. On a good note, the Institute of Medicine, which provides recommendations to the USDA, reviewed our food packages in February of 2004. They were focusing on changes that are cost neutral, efficient for nationwide distribution, wouldn't add to the administrative burden of local agencies, and are **culturally suitable. We are an increasingly diverse population in the United States so we need to make sure that everybody feels welcome and respected.**

Sandy Dralle (California Health Collaborative) We have a gestational diabetes program for mothers-to-be that we work with and we work with WIC. **When you show that list of food if they have two or three children in the family do they get that much for each child?**

Beth Arrindell: Yes. Each child gets its own separate package. It does not vary. It's only based on the age.

Participant question: Regarding funding, being that we are and have been for 20 years a double digit unemployment area, do we get special funding or consideration for these programs from the federal, state, or county level?

Beth Arrindell, R.D. WIC: I'm not an administrator but I can tell you that a lot of it is based on caseload. **We do outreach to enroll people, and the more that we can demonstrate that there is a need and government is favorable to increasing our caseload the more likely we are to be able to help more people.** The Fresno WIC serves 26,000 people. We have 16,000 in southern Fresno County.

Participant question: I think it's pretty well viewed that one of the contributing factors is **not only the intake of foods we eat but also the lack of exercise and lifestyle today with our children.** What is kind of disturbing is that I seem to note blurbs every once in a while where another school district has eliminated their recess period or physical activity or have encouraged that sort of thing. Are you as an agency aware of anyone that's working with the school districts to try to preserve some physical activity for our children?

Beth Arrindell, R.D., WIC: First of all, we should be **doing more collaboration, absolutely, and as dollars get smaller that's one of the things that were looking to do.** I myself am not. My boss, Gloria Pecina, would be more involved in that kind of collaboration. It's a good idea, and we should be doing it. From a different perspective, my husband is a third grade teacher and he often talks about having the awful quandary of supporting physical activity and getting past those darned tests. The testing that they have to do is enormous pressure for them. He wants kids to be active, and yet they're doing all these standardized testing and he can't afford to lose that time either. What does he do? So you bring up an excellent point. I'm always for the physical activity.

Edie Jessup: That's really important, I think, and **we need to go back and do some legislative work on what's happening with our schools.** I know that there is a new initiative with the health centers to do food stamp outreach, and that's exciting. That will help attach food stamps to your WIC clients.

My question is about WIC-only stores. Could you make a comment about that? There are WIC-only stores, and my concern is that they charge top dollar for all of these foods listed and because it's a capped program it uses up the money faster than if people were going to a regular market. I know that there's convenience in it because my understanding is the store has only those listed foods. Could you talk about that and how much of that is going on here in the Fresno area?

Beth Arrindell, R.D. WIC: In almost every community where there are WIC offices, there are WIC-only stores. Part of it is convenience and part of it has to do with the experience of a WIC participant in a grocery store. Quite often they are made to feel kind of shamed because they're in WIC. *I know from the ladies that I've spoken to there is some relief in going to the WIC store because it's easier and it's closer, but they'll also say, "I don't have to stand in line and if I get something wrong they don't make me go back in front of all those people."* So there is an emotional piece to it. **As far as cost goes I'm not sure how state WIC is working to address that.** I'm not involved in that piece and in the way WIC is structured. **We have to stay separate from the WIC-Only Stores.** *Those are vendor issues.* Anytime, for example, a participant has a difficulty with a vendor on their WIC card there is an 800 number that they can call. The way we're set up is structurally quite different. If any of you have comments with regard to that I encourage you to talk to the state about that.

Edie Jessup: I think that is an issue and certainly an audit issue to find out what the difference is. The other thing that you might explain is why the vouchers state that it is for a gallon of milk but the maximum price is not stated on it.

Beth Arrindell, R.D. WIC: That's a good point. A couple of years ago the cost of milk was through the roof and we couldn't keep up on our vouchers. It was so varied. We do have **varied prices throughout the State of California, but the milk products are the only ones where there is no price listed because we couldn't do it.** People weren't getting the milk because the top dollar that they would put there wouldn't be enough. With all the other foods there is a price range stated on the WIC coupon *not to exceed a certain amount.* *At this point they haven't put a dollar amount for the milk simply because we just couldn't keep up with the cost of milk.*

Larry Trullinger: I think you touched upon a problem that may be a part of the equation and that's the **stigma that some people may feel of embarrassment**. That's not dissimilar to the old Food Stamp program where they had all of the different coupons they had to pull out and immediately everybody around knew that they were disadvantaged. The Food Stamp program has gone to EBT cards. **Has your agency thought about being a part of that EBT card for your funding or a separate card for use to get away from this multitude of vouchers that these poor mothers have to pass out at the counter?**

Beth Arrindell, R.D., WIC: WIC became computerized not too long ago, just before I moved here in 1997, so it just went to a computerized system. Before it was all paper like the old credit cards used to be and they had to print out six or seven per person. It was terrible. We're pretty proud of the fact that at least we're computerized, but there is a lot of talk about going to an electronic system. **We now have at least a multiple food coupon**. We've got milk, cheese, and eggs on one to reduce the amount of paper. In terms of environment we need to be aware of that. **But in statewide meetings that I've attended there has been talked about an electronic system.**

Ray Ensher: I never had heard of these WIC stores, but if you buy in bulk that would be quite a savings. **Isn't that done in the WIC program in these WIC-only stores?**

Beth Arrindell, R.D., WIC: As I understand it it's kind of an individual retail situation, although they do have to follow rules and regulations as stated by the federal and local state WIC program.

Ray Ensher: Does the Blackstone and Shaw farmers' market accept the WIC vouchers? I thought I saw some people giving them there when I was there.

Beth Arrindell, R.D., WIC: I couldn't answer that. If they do you should see 'Certified WIC' signs.

Rev. Walt Parry, Fresno Metro Ministry: At what point is a new mother no longer eligible to be engaged in the WIC program, and do the children continue to be eligible even after the mother is not and if so, up until when?

Beth Arrindell, R.D., WIC: At this point in the State of California once a woman has her baby if she chooses to not breastfeed she is eligible for the following six months. Even if a woman doesn't have any kids but she is pregnant and miscarries she is eligible to be on the WIC program for six months because we understand that physiological changes do take time and so we want to provide good nutrition for that woman for the next six months. If a woman is on the WIC program and is breastfeeding even just once a day she can be on the WIC program for one year. **At this point we are providing WIC coupons for children up to age 5.** There have been times that our funding has been cut, and certainly it has happened in other states. *If are we are cut we begin by cutting groups that are perceived to be at lower risk. Often it's the older kids and then it progresses to younger kids and then to infants and so forth, so it depends on our funding structure,* but at this time we are fully funded so we are able to serve the maximum capacity.

Rev. Walt Parry, Fresno Metro Ministry: So after the woman has been on WIC for one year if she was breastfeeding, the children then continue to be eligible until age 5 and then if there's a new child it starts over again?

Beth Arrindell R.D., WIC: Yes.

Rev. Walt Parry: But it has to start with a woman who is pregnant? You can't just start with a child?

Beth Arrindell: Certainly, if a mom comes in and she has moved or comes to us with a young child under age 5 we will definitely enroll the child into the program.

Rev. Walt Parry: So any child under age 5 could be eligible if the family meets the income guidelines at any point?

Beth Arrindell: Yes.

Edie Jessup, Fresno Metro Ministry: Do you have a waiting list?

Beth Arrindell R.D., WIC: No, absolutely not. We work hard to meet our caseload and at the end of every month we have a staff meeting and we are informed that we met 100% of our caseload. There are agencies that are 100%, 120% and those are the people who would apply to the state for increased caseload, but at this point we are around 100%.

Edie Jessup: So that means that you could still handle more cases?

Beth Arrindell: Yes. You bet.

Edie Jessup: Can you tell us about eligibility for immigrant folks who are either documented or undocumented?

Beth Arrindell R.D., WIC: When we enroll a new participant we require proof of address. Ideally we'd like a bill, some kind of an electricity bill or water bill with their name on it. We understand that some parents or individuals just don't have that so we ask them to have the person in the house or someone at that location write a letter saying so and so lives here. We'll accept that. We also require proof of income. Some people have a check stub, some don't. If they have a Medi-Cal card that's great. There are a number of ways that we address income as well. We'll look at vaccination cards for children, but we do not require any immigration documents. If someone chooses to use a passport for a form of identification we would take that.

Gwen Turner: I'm new at this so I'm confused. WIC and food stamps aren't the same, so if a woman is pregnant and she's receiving welfare and gets food stamps can she get WIC or does she have to wait until the child is 5 to get food stamps?

Beth Arrindell R.D., WIC: I couldn't speak to food stamps. My understanding is that she would definitely be eligible for all of the above. Oftentimes we are confused with food stamps because we provide checks so people often think that we're food stamps. We are two separate programs and if a mother meets the eligibility requirements of the Food Stamp program and WIC she would receive benefits from both. In fact, we provide referrals. One of our screening questions when we enroll a person asks if they are receiving any kind of financial assistance, food stamps and Medi-Cal, and if they're not we are required to provide referrals to places where they could get those things.

Rev. Walt Parry: You said some of the women feel basically harassed. Is it primarily by clerks or by people that are in the store or are they embarrassed to see their own friends?

Beth Arrindell R.D., WIC: It's hard to say. I've heard stories of both, and perhaps it's a self-imposed sense of embarrassment. Maybe they feel bad. I've heard stories of clerks saying things and I've heard stories of people in line making comments and then I've heard stories,

and this is no longer allowed, about stores having signs that say “No WIC Vouchers” above a particular isle. If that store takes WIC vouchers they’re not allowed to post those signs.

Rev. Walt Parry: Do people generally have to go to a WIC office or can a WIC office work through congregations or children’s centers? Is there an apparatus both as far as enrollment and education so that it occurs in some setting in which they’re already involved like a congregation or like a children’s center?

Beth Arrindell R.D., WIC: I’ve seen WIC programs based out of healthcare facilities and based out of a county or some kind of a government program. There are 83 WIC agencies in the State of California, and there are more than 600 sites. As far as the mandated requirements to become a WIC agency I can’t speak to that, but if you or anyone else is interested I encourage you to contact state WIC because we know there’s a continued need.

Johnnie Belford, Fresno County Employment and Temporary Assistance: I currently do outreach (Food Stamps and Medi-Cal) into the community and we do Kerman WIC Clinic. We go there every Wednesday. In fact, they’re there today. We see anywhere from 20 to 40 people a day with two workers. We’ve tried other sites and Kerman has been the best one so far.

Larry Trullinger: You mentioned that stores are not allowed to have a sign that says “No WIC Vouchers.” I occasionally stop in a store that has a sign that directs them to one cash register if they have WIC. It’s like a cash only line or so many items or whatever it might be. Would that be acceptable, or not?

Beth Arrindell R.D., WIC: I couldn’t say. I just know that in a particular conference I went to there was an issue with regard to directing them to not go to an isle. I would think it wouldn’t be acceptable, but again, I’m not sure. We’re separate from the vendors.

Edie Jessup: Is there WIC training for stores? Are stores trained in how to handle the WIC program?

Beth Arrindell R.D., WIC: Yes.

Edie Jessup: You spoke of fruits and vegetables as being something that WIC is working on at a federal level. That seems like such a critical issue in terms of health and nutrition for these low-income families. Until such time as fruits and vegetables are included is there a possibility of some vendors setting up fruits and vegetable carts outside WIC stores or making a particular outreach where perhaps one of the food banks could actually be there on certain days a week to hand out fruits and vegetables? We’re coming into the season again and we’re not rescuing so much food. Participants have to come to your clinic once a month, is that right?

Beth Arrindell R.D., WIC: It varies. A pregnant woman comes once a month. Sometimes our kids or families come once every two months, and we do have individuals who come once every three months, so it varies.

Edie Jessup: But they do come to the office. That’s a place that they come.

Beth Arrindell: Yes, absolutely.

Edie Jessup: What is the issue with the fruit and vegetables and WIC not having vouchers for them?

Beth Arrindell R.D., WIC: Part of it seems to be setting it up to be nationwide because we have to provide access to everybody and make it the same. That's my impression. I can't speak for the state or federal level, but I think your ideas of collaboration are great and I think WIC is always looking to do that. Your idea of having a fruit and vegetable vendor sounds good.

My impression of the state WIC guidelines for those WIC-only stores is that they are pretty tight, so I'm not sure what WIC requires those stores to have or not have in front of them.

Edie Jessup: That's interesting. Maybe you could find that out. WIC does not run them. They somehow approve them, though. They have regulations.

Beth Arrindell R.D., WIC: They do training and they definitely are in close communication. Beyond that I'm not real sure.

Edie Jessup: Because some kinds of foods that are on your list are fairly expensive, even if a family has a few kids that are younger but then has older kids, it may not be the intention but I'm sure that those older kids are having to utilize the WIC allotment in order to eat. Can you talk about that? Some people might say that's not what it's meant for, but I know that people are so hungry that that has to be true.

Beth Arrindell R.D., WIC: Definitely. We talk about that. The food is available in the home and it is accessible to everyone. So ideally, of course, it is set up for that child, but I have talked to participants who definitely talk about how much their household is going to miss that food because once the child turns 5 they no longer qualify for the program. We talk about the School Lunch program or the Head Start program that's available for that child, but I definitely have gotten a sense from those parents that that food will be missed from the household as well.

Edie Jessup: Thank you very much, Beth. At the California Nutrition Network Joint Steering Committee conference I was at yesterday there was a presentation by WIC; and I really commend you to take a look at the materials that Beth brought today on the program. **WIC has developed really good materials and if you are from congregations having some of these materials in your brochure rack so that folks know where they can connect up with WIC would be a really excellent way to make sure folks know how to access WIC programs in Fresno County.** The other thing would be to connect them up with the **Food Stamp program** also. If you're interested in the posters on Food Stamps, Johnnie Belford, Fresno County E&TA can help you get that information also.

I'd like to mention the other things, too, that can help support families with young children. The **First Five Commission** certainly is involved with the health and nutrition of young folks. The **Head Start** program is, like schools, another really important support for families with young kids who are not high income. **Debi McAllister, you're the food service person with Central Valley Children's Services, and you are the sponsor for federal programs that serve licensed daycare homes. Do you want to talk a little bit about that?**

Debi McAllister, Central Valley Children Services Food Service: Our program covers any licensed daycare provider. We're in Fresno County, Madera, Tulare, and I'm trying to think of some of the other counties that we have, but we go all the way from here to the mountains to Huron, Coalinga. We got a grant a few years ago to recruit some of the migrant worker women that were working in the fields to take a look at staying home and becoming a licensed daycare provider and taking care of the children so that they wouldn't have to go to the fields, and these children were then getting some meals. We reimburse them for food that is being served to the children. They have to follow basic nutrition guidelines. We're the same

program as the School Lunch program so they have to follow those USDA guidelines. These providers have to make a menu out, submit it to us, and make sure that they're feeding the food that needs to be served to the children and then we reimburse them. **The money won't totally cover all the food that they serve but it really benefits the children. For a lot of the children the only meals that they get sometimes are the meals at daycare, especially the migrant workers.** They're out there from sometimes 4 or 5 in the morning until 8 or 9 at night, so it's very important that they're getting some good meals. **We've gotten about 120 Spanish-speaking-only providers. Now we're working with the Agency for New Americans trying to recruit Hmong providers.** It's kind of a cultural thing that Hmong have left their children with their own and in their own families, so it's been a big change to try to get them to leave their children with a provider. **If we have a Hmong daycare provider they will be more apt to leave the children with them. With the new generation there are more of them in the workforce and they are leaving their children with a daycare provider. With our food program the provider needs to be licensed and we monitor them. We have to go out to their home three times a year, and two times are unannounced.** They don't know that we're coming. We check on their menus, attendance, and we look at what they serve. It is a pretty beneficial program.

Eddie Jessup: Do you refer people or do you educate the daycare providers about the WIC program?

Debi McAllister, CVCSN: Yes. We use a lot of the pamphlets and we have different fliers that go out to try to get the parents to use these. **It was very beneficial when we had these in Spanish when we went out to the migrant workers.**

Eddie Jessup: These are daycare homes. They're small.

Debi McAllister, CVCSN Yes. They can be licensed for up to eight children or a large family daycare home can have up to 14 children in their home.

Eddie Jessup: Have you been able to re-pick up the sponsorship for the big daycare centers again?

Debi McAllister, CVCSN: We dropped our sponsorship for Child Care Centers because the state wanted each center to sponsor themselves. It's more beneficial to the center. I don't know how the USDA figured this out but the centers get a minimal amount of money per meal. A daycare home, for example, is reimbursed about \$1.92 to \$1.95 per lunch per child. A center got something like \$.80. Snacks were about \$.03 at a center whereas a daycare home got \$.85. **It made no sense.** For us to sponsor these centers we had to have an administration fee to do all the paperwork and process that. It just was wasting their money. It was better for them to sponsor themselves. **A center has to be a nonprofit center and the majority of our centers here in town are for profit.** Just in the last year or so they now have a program so that if a for-profit center has at least 25% low-income children, 185% below poverty, then they can be put on the Childcare Food Program, but other than that the for-profit centers are not allowed. **It's very interesting to go to a for-profit center to see the meals. When we started sponsoring centers it was just appalling when we would go to the centers for profit and see what they were serving the children. My daughter worked in a daycare center for three years and it was just amazing to see them spread frosting on a graham cracker and that was what the kids got for a snack. The nonprofit centers that were put on the food program that opted to join, and most of them are church affiliated because that's where they get their nonprofit status, the meals were so much better because they had to follow our strict guidelines so you really saw the fruits and the vegetables and the higher quality snacks being served.** So many people have the idea that just because it's better food you're going to have to spend more. It's not so, especially in the daycare home situation. We tell these people to buy in bulk and serve beans and rice and the different foods that you can buy

at a lower price, the fresh vegetables instead of buying fancy frozen, canned, or prepared. We encourage them to just serve some fruit and crackers or something.

Edie Jessup: Thank you. I think that this is a big issue and **we can see very clearly how fractionalized all these programs are that are all intended for the same population and it's very hard for folks to get hooked up with the programs that, taken together, could really help.**

Ray Ensher: Yesterday I was principal for a day at Centennial School. I was absolutely amazed that 88% of those children in that school are getting the free lunch program there, and they are allowing their children to have food in their classroom to eat. *The thing that staggered me was they sold ice cream bars to raise money.*

Edie Jessup: Yes, and this is why **we are looking at a school district health and nutrition policy because it doesn't make any sense. Do they have breakfast in the classroom?**

Ray Ensher: It was in the cafeteria where they have the breakfast.

Edie Jessup: But you said they had food in the classroom.

Ray Ensher: Yeah, they were allowing them to bring the noodles. They had those Cup O' Noodles things with the little packet that they could have right there. It was kind of interesting to go in the classroom and see what's going on.

Edie Jessup: It is National Breakfast Week and I recommend that all of you call a school in your neighborhood and ask them if they are serving breakfast, and if you would call and report that to Phoua and I; we would be very interested. Thank you very much. I hope to see you next month and at any of our task groups that are meeting.

Beth Arrindell, from Fresno County WIC, thank you so much!