

Title	Abstract
<p>Virtual Options for Promoting Developmental Monitoring in WIC</p>	<p>“Learn the Signs. Act Early.” (LTSAE) is Centers for Disease Control and Prevention’s (CDC’s) nationwide initiative to engage parents and professional care providers in ongoing developmental monitoring and early action on developmental delays. The LTSAE WIC Model was developed in Missouri to integrate LTSAE into WIC clinics, promote referrals for early identification and screening, and encourage children’s healthy growth and development. We will discuss simple options for promoting developmental monitoring virtually throughout the pandemic and beyond.</p> <p>During this presentation attendees will learn about: CDC’s nationwide initiative, “Learn the Signs. Act Early.” Simple ways you can promote developmental monitoring virtually within your state. How some states in this project have adapted the program to include virtual options within their state.</p>
<p>Antiracism training for WIC nutrition professionals: A promising strategy to improve attitudes, awareness and actions</p>	<p>WIC nutrition professionals serve as frontline providers for Black and Latinx families who disproportionately experience poor maternal/infant outcomes. With racism driving disparities, antiracist tools and trainings are necessary for providers to offer care using a cultural humility framework. In 2019, we conducted a 3-hour antiracism training for Philadelphia WIC nutrition professionals that included an exercise to reflect on identity, review of key concepts, workplace scenario and debrief, and an action tool. Our objective was to determine whether antiracism training at WIC is associated with improvements in attitudes, awareness, and confidence in identifying and addressing interactions that perpetuate individual, interpersonal and systemic racism. We surveyed attendees before the training, immediately after and at 6 months post-training, comparing responses at each time point. Findings suggest ongoing antiracism training may improve attitudes, awareness and actions. More work is needed to examine how these changes translate into improved quality of care for WIC participants.</p>
<p>WIC participant and agency responses to WIC services during the COVID-19 pandemic</p>	<p>The COVID-19 pandemic brought unexpected and unprecedented changes to WIC service delivery in order to protect the health and well-being of staff and participants. Results of quantitative and qualitative data collected during the pandemic from WIC participants and WIC local agency directors in California highlight the significant success of the California WIC program in reaching participants and meeting their needs during the COVID crisis, and suggest multiple strategies useful for continued program improvements throughout the nation.</p>
<p>Balto Delivers For WIC</p>	<p>In 2020, the State of Alaska launched the nation’s first online-ordering system for WIC households. Come to the Balto Box program session to learn more about what the State of Alaska created to meet the needs of rural WIC households in an era of growing online-shopping and WIC’s transition to EBT. The speaker will share an explanation of how the program was brought to life including the hurdles and lessons learned.</p>

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<p style="text-align: center;">Food Left on the Table: Assessing and Improving WIC Participation at One Primary Care Clinic</p>	<p>In our pediatric clinic, WIC participation declined 40% from 2015-2019. We aimed to understand this decline and designed quality improvement (QI) interventions to improve it. Over three QI cycles, we screened all eligible well-child visits for WIC participation and reasons for non-participation, educated and referred interested families, and developed an automatic referral system. Of 842 visits, 25.1% were WIC non-participants. 28.5% of families were unaware of their WIC eligibility or how to enroll. Identifying as “other race/Not Hispanic” and higher growth percentiles were associated with decreased odds of WIC enrollment. After QI initiation, there was an increasing trend in WIC participation and 60% increase in WIC referrals in our clinic.</p> <p>We’ve identified a patient cohort that may benefit most from WIC education, and designed QI interventions that appear to increase WIC participation in our clinic. This has potential for broader impact by targeting WIC-eligible families beyond our clinic.</p>
<p style="text-align: center;">WIC Participant and Program Characteristics 2018 Food Package and Costs</p>	<p>WIC PC data are collected from all WIC State agencies, with a record for each person certified as eligible to participate in WIC in April of the reporting year. The data submissions contain information on participants’ local agencies; certification categories and dates; demographic, economic, and health characteristics; and food package contents. The data are tabulated and results are presented in two reports: the 2018 Participant and Program Characteristics Report and the 2018 Food Packages and Costs Report. This presentation includes key findings about WIC food package contents and costs in April 2018.</p>
<p style="text-align: center;">A Descriptive Analysis of Redemption Patterns by Vendor Type among WIC Participants in Massachusetts</p>	<p>The objectives of this study were to describe (1) where Massachusetts WIC households redeem their food benefits and (2) variations in benefit redemption depending on a household’s usual type of WIC vendor. Administrative data provided by Massachusetts WIC included monthly household-level redemption data for approximately 200,000 households shopping at about 1,000 unique vendors between 2015 and 2019. Over half of households relied only on superstores and supermarkets when redeeming benefits in 2019, while less than 5% relied only on small grocery or convenience stores. Between 2015–2019, reliance on large vendors increased, while reliance on small grocery and convenience stores decreased. Compared to other vendor types, households that redeemed benefits at superstores had lower redemption levels for most benefit categories. Retail-based efforts to increase redemption should consider the role of different store types in shaping benefit redemption. Strategies to increase redemption may be especially important for WIC shoppers relying on superstores.</p>

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<p>Understanding Factors Related to Food Waste in the Supplemental Nutrition Program for Women, Infants, and Children (WIC). A Qualitative Study in Indianapolis, Indiana</p>	<p>According to the United States Department of Agriculture, in 2010, the amount of food wasted was worth more than \$161 billion. The highest food waste level is from the household. This study focuses specifically on Women Infant and Children (WIC) participants in Indianapolis, IN.</p> <p>The purpose of this study is to understand behavior, attitudes, and factors that influence food waste among WIC program beneficiaries in IN. Also, exploring the level of knowledge about food waste and its side effects.</p>
<p>Building WIC Back Better: Retaining and Adopting Strategies to Simplify Certification</p>	<p>When the pandemic stuck, WIC programs across the nation acted quickly to continue services while keeping participants and staff safe. State and local agencies modified practices for enrollment and recertification under waivers approved by USDA. Conducting certification remotely required new ways for families to apply for WIC, to provide required eligibility information and sign documents, and to interact with staff using phone, video and text messaging. These innovations offer an important base on which WIC agencies can build more accessible and flexible certification practices. This session will highlight ways to simplify enrollment and recertification. Drawing on pre-pandemic pilots, a survey of certification practices under waivers, and state interviews, we will cover areas such as using technology for eligibility determination, conducting certification by phone or video, and streamlining the certification process. Speakers from WIC agencies will share examples of practices they enhanced during the pandemic and new remote approaches they implemented.</p>
<p>Multi-State WIC Participant Satisfaction Survey: Learning from Program Adaptations During COVID</p>	<p>The COVID-19 pandemic has created numerous challenges for WIC participants and for the delivery of WIC services. What can we learn from adaptations to make WIC more user-friendly moving forward? Come learn what over 6,000 WIC participants from multiple regions across the country have to say.</p>
<p>Supporting Breastfeeding and Healthy Eating for Women, Infants, and Children Through the Dietary Guidelines and Policy Change</p>	<p>The 2020-2025 Dietary Guidelines for Americans was released in December 2020. This is the first edition of the Guidelines that take a life stage approach, including advice for pregnant and lactating women, infants, and children under two years. Now complete for 2020-2025, the Guidelines will influence education and food provision in many policies and programs, including WIC. However, many families still face significant environmental, socioeconomic, and structural barriers to meeting their breastfeeding goals and accessing healthy foods. In this session, presenters will provide an overview of the process used to update the Dietary Guidelines in 2020, including the development of advice for pregnancy, lactation, and birth to 24 months; summarize the Guidelines for these life stages; and explain the implications for policies and programs. Presenters will then share priorities for policy change to help people meet recommendations for breastfeeding and healthy eating.</p>

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<p>Visualizing the impact of COVID-19 on WIC</p>	<p>Data visualization can help identify trends and patterns in WIC. At the start of the COVID-19 pandemic, Insight Policy Research (Insight) and the National WIC Association partnered with five WIC State agencies to visualize changes in WIC program participation and redemption patterns. Insight designed a series of State-level Tableau dashboards that displayed information on unemployment trends, COVID-19 cases, and WIC program participation across a series of months. Each dashboard was tailored to the data WIC State agencies had readily available on program participation and redemption patterns. These dashboards were some of the first publicly available resources that explored trends and patterns in WIC across multiple States during the COVID-19 pandemic. This presentation will explore the dashboards developed for the State agencies and discuss with the North Carolina WIC State agency how the dashboards informed their work and how the agency is thinking about using data visualizations moving forward.</p>
<p>Capacity Building for Local WIC Agency Evaluation of Innovative Projects</p>	<p>The Johns Hopkins Participant Research Innovation Laboratory team will present the findings of a November 2020 needs assessment survey exploring WIC agencies' experience with developing, implementing, and evaluating innovation projects. Survey results indicate that local agencies have experience implementing innovation projects but have less experience with evaluation and dissemination. Respondents indicated that they would like to receive training and technical assistance (TA) to support development and evaluation of innovation projects. Most respondents indicated that they have not evaluated the impact of COVID-19 changes, and over one third indicated that they would be interested in receiving training or TA to enable them to conduct an evaluation of new activities adopted during COVID-19. During this presentation, the methods and results of the survey will be further discussed, and the presenter will describe how these survey findings can inform the training, TA, and tools provided to local WIC agencies to support innovation projects.</p>
<p>How State WIC Agencies Can Leverage Medicaid and SNAP Data for Targeted WIC Outreach – Lessons from Workshops with Seven States</p>	<p>This conference session will facilitate an interactive conversation about cross-enrollment into WIC from other programs that reach families with infants and young children, such as Medicaid, SNAP, and other maternal and child health programs.</p> <p>Panelists from Benefits Data Trust (BDT), the Center on Budget and Policy Priorities (CBPP), and two state WIC agencies will draw on their experience planning and launching data matching and text-based outreach to lead a discussion of key steps in planning a modernized, data-informed approach to WIC outreach.</p> <p>This session will catalyze critical consideration of how WIC agency representatives in attendance can begin to modernize their outreach processes using data and technology to identify adjunctively eligible families and conduct targeted outreach.</p>

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<p>Placing Early Child Nutrition in Historical and Racial Context</p>	<p>Nutrition during the first 24 months of life, inclusive of human milk feeding and the introduction of complementary foods, has a strong lifelong impact on child health and development, suggesting early child nutrition is a critical social determinant of health. Due to racism in nearly every institution that influences health, children of color are less likely to be exposed to nutritious complementary foods and more likely to grow up in areas that are food insecure. This in turn creates inequities by race in the form of higher rates of obesity and chronic disease later in life. Understanding the roots of inequities in access to nutritious complementary foods is a necessary contextual framework for improving the health of the communities. The Association of Maternal &amp; Child Health Programs will present this framework and the Indigenous Peoples Task Force will share their work increase access to indigenous foods for infants and toddlers.</p>
<p>A Qualitative Evaluation of Factors Related to MA WIC Program Retention and Food Benefits Redemption Among Current and Past Participants</p>	<p>WIC is a powerful force against nutritional disparities in the U.S. However, only 67% of eligible families fully redeem their benefits and 25% of eligible 4-year-olds participate. Our goal was to explore facilitators for participation and examine reasons for incomplete redemption of benefits and leaving the program early. Among a unique sample of both current WIC caregivers (n=20) and those who chose to leave while eligible (n=17) in Massachusetts, we conducted semi-structured interviews, informed by WIC leadership's perspectives. Themes across current and terminated participants included positive feelings about WIC; insufficient funds for fruits and vegetables ("F&amp;V"); food benefits inflexibility related to culture, allergies, and preferences; concerns related to the perceived arbitrary nature of health tests; and confusion from in-store item mislabeling. A key barrier may be a misperception that participation "takes" benefits from someone else in need: "My daughter didn't really need any of the stuff...someone else can have it."</p>
<p>Equity Systems Continuum Framework: Guiding Systemic Change in Maternal and Child Health</p>	<p>The Equity Systems Continuum framework is a mechanism for healthcare systems to address systemic racism and other forms of oppression. With support from the W.K. Kellogg Foundation, the National Institute for Children's Health Quality (NICHQ) in partnership with the Global Infant Safe Sleep Center (GISS) are developing The Equity Systems Continuum. This continuum is made up of three systems: <em>Savior-designed systems</em>, <em>Ally-designed systems</em>, and <em>Equity-empowered systems</em>. In order to begin to move to anti-racist, equitable systems, organizations must first be able to identify which of their policies and practices support equity and which are hinderances.  This presentation will introduce participants to the Equity Systems Continuum framework and Equity Systems Audit Tool, present an opportunity to reflect on their organization's position along the continuum, and identify potential changes to their policies and practices to create more equitable, anti-racist systems.</p>

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<p>WIC Technology in an Interconnected World</p>	<p>Disparate systems work together to increase the value that the WIC program provides to various stakeholders.</p> <p>For example, mobile applications may allow a WIC shopper to check if an item on the grocery store shelf is eligible for purchase. This reduces the chance that the WIC shopper will present an inadvertently present an ineligible item at the time of the checkout. To make this possible, the mobile application must communicate with the eWIC processing system.</p> <p>In technical-speak, this communication is based on a “service-oriented architecture” model to facilitate the sharing of information between the two systems. This model is not new. However, newer technologies make it easier than ever to use this model to get varying systems to work together to provide high-value solutions.</p> <p>This session explores how WIC uses this model today and the possibilities that it presents for making WIC even more valuable in the future.</p>
<p>Transformative Change: How Paperless Documentation Has Impacted the New Mexico WIC Peer Counselor Program</p>	<p>In 2020, New Mexico WIC made the leap from a paper system for our peer counseling program to a paperless documentation system in Google Workspace. With 55 contracted peer counselors and 6 contracted managers, the program underwent a complete overhaul that allows our program to flourish despite interruptions to clinic spaces, such as the COVID-19 pandemic. During the presentation, we will discuss the decision to transition to a paperless system, the benefits and challenges of integrating a paperless documentation into our WIC world, and how the changes have impacted staff, peer counselors, and peer counselor management.</p>
<p>Words Matter: Language Equity in Lactation Care</p>	<p>Old habits die hard, and using outdated terminology in the world of lactation is no exception. In 2019, NM WIC overhauled its website, and we made the choice to revise our website copy, materials, policies, and every day language around lactation to be inclusive and welcoming. This workshop will discuss the imperative of using language as a form of representation and inclusivity, specifically for lactating WIC participants. We will discuss how birthing parents and their communities have evolved to reflect and recognize greater diversity and diverse communities. We will discuss the importance of inclusiveness, how NM WIC updated its language for inclusiveness, the benefits and challenges of implementing new language for WIC clients who rely on our support and services during such a vulnerable period, and how employing inclusive language allows us to be our best selves to those we serve.</p>

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<p>Dynamic Strategies for Breastfeeding Education and Support</p>	<p>How we teach can be just as important as what we teach. In a world of high anxiety and “fake news” breastfeeding education and support must be creative and engaging to meet the needs of today’s young families. This evidence-based workshop reviews characteristics of today’s learners and pitfalls of language commonly used to teach new and expectant mothers. Discover three innovative teaching strategies: "Start Here, not There," "See, then Share," and "Gaze, then Engage" and how “Broadcasting and Commentating” on a baby’s behavior can both share breastfeeding information and boost mother’s confidence. Motivating parent stories, engaging video, and Intriguing workshop exercises enhance participants’ ability to connect with today’s parents and to share critical information that helps mothers meet their breastfeeding goals.</p>
<p>Baby Led Weaning and WIC: Yes you can!</p>	<p>Baby Led Weaning as an approach to introducing solids has been growing in popularity over the past 15 years. However, despite the growing demand from parents, there remains a lack of guidance from health care professionals. Additionally, there are some misconceptions around baby led weaning including safety and that it is incompatible with WIC. This presentation looks to provide further understanding of what baby led weaning is and dispel the misconceptions.</p>
<p>Using Google to Understand the WIC Customer Journey and Increase Online Engagement</p>	<p>Google has a variety of products that are easy and free to use including Google Maps, Google My Business and Google Analytics. In March 2020, with the support of the Hopkins Participant Research Innovation Laboratory for Enhancing WIC Services (HPRIL) grant, Miami-Dade WIC launched the use of Google Analytics to track website activity and monitor customer acquisition. Done in conjunction with a 12-month integrated media marketing campaign, the detailed data from Google Analytics helped us improve our marketing, better serve our WIC community, and ultimately drive more customers and visitors to our website. We will review our journey with Google products and discuss our recommendations from a local agency perspective. We will provide insights on how other WIC agencies can use Google Analytics, Google Maps and Google My Business to their advantage in order to improve WIC promotion and increase enrollment and engagement.</p>
<p>Reinventing Heart Button Counseling for a Virtual Environment</p>	<p>WIC leaders are motivated by a sense of meaning. Chickasaw Nation WIC leaders invested the past seven years in reinventing counseling as a way to better serve our WIC clients and change more lives. Emotion-based counseling was taking place in our clinics and then the pandemic hit, changing everything about how we serve. &lt;/p&gt; After years of teaching reinvention to our clients, we found the need to adapt our own education methods to meet the needs of a virtual environment.</p> <p>You’re invited to hear how we changed counseling delivery methods and developed new Heart Button reinvention roadmaps (lessons). You will leave with access to our free Heart Button materials formatted for virtual nutrition and breastfeeding education classes using the Zoom platform. Come be inspired and join our journey to greater meaning for clients and staff.</p>

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<p data-bbox="29 285 551 399">Making Breastfeeding Work at Work: Legal Protections for New Parents</p>	<p data-bbox="567 107 2405 345">Returning to work after childbirth can be challenging, but workplace protections can help make it easier. Breastfeeding parents are more likely to meet their breastfeeding goals when they have access to paid family and medical leave as well as the time, space, and support they need to express breast milk at work. But, too often, parents struggle to access simple breastfeeding accommodations, even when they are protected by law. This session will give WIC staff and advocates the information and tools they need to educate families about their workplace rights.</p> <p data-bbox="567 394 2421 548">The expert panelists will discuss federal and state paid leave laws and active legislation, laws protecting the expression of breast milk at work, and legislation to protect breastfeeding parents from discrimination. Participants will learn how to assist breastfeeding parents in securing the accommodations they need and address particular challenges and options for workers during the COVID-19 pandemic.</p>
<p data-bbox="29 659 551 898">Don't Quit the Quit: Strengthening Community Support for Families Impacted by Opioid Use Disorder Through Collaboration with North Dakota WIC</p>	<p data-bbox="567 589 2421 954">About 4.6 million women in the United States report opioid misuse or opioid use disorder (OUD). Don't Quit the Quit (DQTQ) is a North Dakota grant program funded by the Foundation for Opioid Response Efforts. DQTQ is working to empower women in recovery from opioid use disorder. In a unique community collaboration, DQTQ has developed training specifically for North Dakota WIC agencies to provide education about OUD and substance use disorders, OUD treatment during pregnancy and while breastfeeding, and stigma reduction. Training also includes an introduction to the screening, brief intervention, and referral to treatment (SBIRT) technique as applicable to WIC agencies. This training can assist other WIC programs nationwide to meet programmatic goals and objectives that address substance use education and referral for WIC families impacted by substance use disorders. DQTQ shines a light on WIC's important role in addressing the opioid epidemic.</p>
<p data-bbox="29 1089 551 1287">Promising Practices to Promote Equity, Diversity, and Inclusion in WIC: Results from the AHEAD in WIC project National Landscape Scan</p>	<p data-bbox="567 979 2421 1344">In 2020, NWA launched the Advancing Health Equity to Achieve Diversity and Inclusion (AHEAD) in WIC project to institutionalize health equity in its work, build capacity to provide health equity education, tools and technical assistance, and uplift grassroots efforts to improve health equity in WIC at the local/state level. As part of this effort, NWA partnered with the University of Illinois at Chicago-Nutrition, Obesity, and Health Equity Laboratory to conduct a national survey of WIC stakeholders (n=1525) to assess the current landscape of policies/practices being used to promote equity, diversity, and inclusion (EDI) in WIC and identify barriers to creating a more equitable WIC environment. In this presentation, we will report the findings from the AHEAD in WIC project landscape scan, including highlighting promising practices currently being used to promote EDI in WIC, recommended approaches and strategies to promote EDI in WIC, and gaps/areas where additional EDI training/capacity-building are needed.</p>



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<p>The role of Puerto Rico’s remote education platform as a strategic support of services during disasters: could this be the bridge towards a shared care model?</p>	<p>Adoption of technology support strategies to achieve administrative and nutritional education goals of the program can also facilitate service adaptation in the event of disasters. We present how the development of Nutriwicpr.com as a remote learning platform developed in response to participant’s requests for alternative learning strategies, has shortened the development and implementation of new or existent disaster response protocols. The addition of a physician registration component to achieve nutritional prescriptions during times of service displacement as observed during the lockdown established in March 2020, has facilitated critical information needed to achieve communication among services. Interactions between providers through this technological portal provide the opportunity to align services towards a shared-care model, addressing the remaining concern expressed by program participants during the formative phase.</p>
<p>A New Look at Community Partners: Opportunities for Collaboration to Improve the WIC Experience</p>	<p>As local WIC agencies seek to improve participants' experiences, many consider relationships with a range of community partners. In this session, we will highlight two local agencies that developed unique partnerships in order to make WIC more supportive and engaging. Each agency will discuss how they successfully collaborated with local partners and what their collaboration meant for local WIC participants and staff.</p> <p>The Allegheny County Health Department WIC Program worked with the Children's Museum of Pittsburgh and WQED to transform a WIC clinic waiting room into an interactive space that would both improve the appointment experience and provide education aimed at simplifying the WIC shopping experience.</p> <p>The Thames Valley Council for Community Action WIC program partnered with a local WIC vendor to develop training resources for store employees, in order to deepen employees’ understanding of the WIC program, and ultimately contribute to a better WIC shopping experience.</p>
<p>Promoting Early Literacy Through Local WIC Clinics</p>	<p>Too Small to Fail (TSTF), the early childhood initiative of the Clinton Foundation, promotes early brain and language development by supporting parents with tools to talk, read, sing and meaningfully engage with their young children from birth. In this session, TSTF will provide an overview of how WIC clinics in Alameda County, CA and Baltimore, MD promoted early language and brain development.</p> <p>Participants will learn about the critical importance of early language and brain development; gain insight into the critical role that WIC clinicians play as trusted messengers in supporting this development and learn about strategies and engaging tools to reach parents and caregivers with meaningful language-rich activities to boost their children's learning and development. Additionally, TSTF will discuss the impacts that COVID-19 has had on families and lessons learned on how to support parents during this time.</p>

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<p>Ensuring Online Shopping for eWIC is a Step Ahead in Technology, Not Step Backward</p>	<p>A look at how technology should be used throughout the online ordering/purchasing process.</p> <p>For example, a very robust online purchasing platform can be stood up to process an online eWIC order and payment, but how that order is filled can make all the difference. The technology that a store picker has available to them can be the difference from moving into new and improved eWIC world or regressing back to a pre-eWIC world where an individual is making the choices again to fill the order. The store picker should have the technology to scan each item picked, making sure that it is a match to the shopper’s order and benefit package, and not be the one to be making the choices visually of what items go in the order . This would also include how the picker can substitute items, again matching the item to shopper’s order and benefit package.</p> <p>This session would explore the instore technology/process used to fulfill and validate an online eWIC order.</p>
<p>Moving eWIC Beyond X9.93</p>	<p>X9.93 has been industry standard that made retailer integration of eWIC possible. It is based on ISO-8583, an older standard that was developed at a time before broadband internet communications were common.</p> <p>In the technical industry at large, systems increasingly communicate with each other over the internet using “web services”. A web service is basically what it says: a service that one system provides to another system over the web. For example, when a mobile WIC shopping app gets the balance from the eWIC processor, it is using a “Get Balance” web service provided by the eWIC processor.</p> <p>Within the payments industry at large, there is movement towards web-services. With the looming entry of e-commerce into WIC, it may be time to consider technologies that are a “better fit” for the internet world. The benefit is that this approach could speed up the implementation of e-commerce for WIC.</p>
<p>Leveraging Annual Participant Experience Data to Inform Advocacy for WIC Enhancements in the COVID-19 Era</p>	<p>In July 2020, Public Health Solutions, the largest provider of community-based WIC services in New York State, issued a digital survey to 25,223 WIC participants to assess COVID-19 impact to which 1,161 (4.6%) responded. As a result of COVID-19, 71% of respondents experienced job loss, 17% reduced hours, and 10% reduced salary. Half (51%) reported difficulty getting WIC-covered products at the grocery store. Respondents were most concerned about their health or their family’s health (72%), rent or housing (62%), employment (53%), having enough food (43%), and access to health care (27%).</p> <p>Virtual visits were appreciated: 95% of respondents said virtual visits met or exceeded their expectations, 89% rated service quality as good or excellent, and 72% want continued access to virtual visits post-pandemic. Survey findings informed advocacy activities demanding increased protections for WIC participants and recommending a hybrid approach to future service delivery to optimize quality and participant experience.</p>

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<p>Experiences Supporting Infant and Young Child Feeding in New Orleans Post-Hurricane Laura</p>	<p>The New Orleans Breastfeeding Center’s (NOBC) Infant Ready program promotes breastfeeding as the safest feeding option in emergencies through training, educational materials, and distribution of emergency infant feeding kits. Beginning on August 26, 2020 NOBC mounted its first local IYCFE response to support pregnant and parenting people with children under 2 years affected by Hurricane Laura. Hurricane Laura occurred around the same time as a resurgence of COVID-19 infections in Louisiana. NOBC launched an emergency parent-infant hotline; collected donations of diapers, wipes, and menstrual products; assessed feeding histories; and distributed innovative emergency infant feeding kits. The experiences and observations of lactation professionals from NOBC providing support post-hurricane show that city and state entities were not adequately prepared to respond to the infant feeding needs of evacuee families. Further, the low rates of breastfeeding observed among the evacuee population drove us to readapt our response as we went.</p>
<p>Assessing the impact and feasibility of WIC remote services and expanded food options</p>	<p>The COVID-19 pandemic exacerbated barriers to WIC participation. At the same time, the outbreak created economic conditions that increased food insecurity. Washington State (WA) WIC has been re-tooling service delivery since the outset of the pandemic to overcome participation barriers. In spring of 2020, WA WIC began offering remote WIC certifications, nutrition education, breastfeeding support and expanded the allowable foods list. Trends in participation, unmet need, food benefits issuance, and use of WIC services were examined in secondary quantitative data. Focus groups with state-level and local WIC staff and semi-structured interviews with WIC clients were conducted. Changes in participation, client and staff satisfaction, food purchasing, and food security as well as processes, facilitators, and challenges involved in the implementation of the programmatic changes will be presented. WA WIC is interested in continuing these program flexibilities after the pandemic. Evidence regarding the impact and feasibility of these changes could inform decision-making.</p>
<p>Now we are FIVE! Findings through age five from the WIC Infant and Toddler Feeding Practices Study-2 (WIC ITFPS-2)</p>	<p>The WIC Infant and Toddler Feeding Practices Study (WIC ITFPS-2), or “Feeding My Baby” study, is a national longitudinal study of 3,775 children followed from prenatal or infant WIC enrollment to their ninth birthdays. Recruited from 80 WIC sites located in 27 states and US territories, the children enrolled as infants are now five years old. This session will address how children who started out on WIC are living, eating, and growing through their fifth year of life, and how participating with WIC is associated with those outcomes. Topics will include maternal employment, child care use, and engagement with federal benefit programs; feeding beliefs and practices and their association with diet quality; food intake, nutrient intake, and diet quality; and child weight and growth patterns. Because WIC ITFPS-2 follows children regardless of whether they continue to participate in WIC, findings will also explore associations between patterns of WIC participation and key outcomes through the fifth year. Previous reports and presentations have updated you on these families through age four years. Come hear exciting updates from the Fifth Year Report!</p>